

P240000047498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

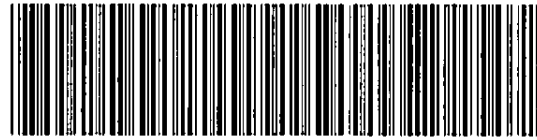
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CLERK OF DISTRICT COURT  
JULIA ROSE, CLERK

RECEIVED  
2024 MAR 10 AM 10:00  
CLERK OF DISTRICT COURT  
JULIA ROSE, CLERK

W240000047498  
1/21/2024 11:49:00

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : FIN-436187

AUTHORIZATION : *[Signature]*

COST LIMIT : \$

ORDER DATE : 03/22/2024

ORDER TIME :

ORDER NO. : FIN-43618

CUSTOMER NO:

DOMESTIC FILING

NAME: Data Analytics Acquisition Corporation

EFFECTIVE DATE:

- ☒ ARTICLES OF INCORPORATION  
☐ CERTIFICATE OF LIMITED PARTNERSHIP  
☐ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- ☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: AMANDA MILLER

EXAMINER'S INITIALS: \_\_\_\_\_

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TALLAHASSEE, FL

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** Data Analytics Acquisition Corporation  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** Data Analytics Acquisition Corporation - (Attention Diarmuid Kelleher)  
Name (Printed or typed)  
  
3250 NE 1st Ave, Ste. 305  
Address  
  
Miami, FL 33137  
City, State & Zip  
  
917.796.6545  
Daytime Telephone number  
  
dkelleher@optionmetrics.com  
E-mail address: (to be used for future annual report notification)

**NOTE:** Please provide the original and one copy of the articles.

DEPARTMENT OF STATE  
TALLAHASSEE, FL

2024 MAR 20 PM 1:56

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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Data Analytics Acquisition Corporation

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

E 1st Ave, Ste. 305

Miami, FL, 33137

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: carry on any and all business and engage in any lawful act  
or activity for which corporations may be organized under the General Corporation Law of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 55,575,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Scott VanHoy, President

Address: 590 Madison Avenue, floor 41  
New York, NY 10022

Name and Title: David Neverson, VP, Treasurer, Sec

Address: 590 Madison Avenue, floor 41  
New York, NY 10022

Name and Title: David Hait, CEO

Address: 10 Venetian Way, Apt 1801  
Miami Beach, FL 33139

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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CLERK OF STATE  
TALLAHASSEE, FL

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, FL 32301

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Diarmuid Kelleher

Address: 1700 Broadway, Suite 2200

New York, NY 10019

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



\_\_\_\_\_  
Required Signature/Registered Agent

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

 CFO  
\_\_\_\_\_  
Required Signature/Incorporator

Date: 3/14/2024  
\_\_\_\_\_  
Date

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CSC FIN-43618

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