## M18000001496

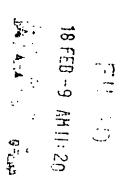
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zi	p/Phoпe #)
PICK-UP W	YAIT MAIL
(Business Er	ntity Name)
(Document Number)	
Certified Copies Ce	rtificates of Status
Special Instructions to Filing Offi	cer:
nand W18-10342	

Office Use Only



400308275354

01/30/18--01026--011 \*\*155.00



O SIMMONS FEB 1 3 2019

## COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Interactive Response Technologies, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Janet Teague
Name of Person
Cornerstone Support, Inc.
Firm Company
70 Mansell Court, Suite 250
Address
Roswell, GA 30076
City State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Cornerstone Support, Inc. Attn: Janet Teague at ( 770 ) 587 - 4595
Name of Contact Person Area Code Daytune Telephone Number
MAILING ADDRESS:  Division of Corporations  Registration Section  P.O. Box 6327  Tallahassee, FL 32314  STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building 2661 Executive Center Circle  Tallahassee, FL 32301
Enclosed is a check for the following amount:

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA Interactive Response Technologies, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "E. L. C.," or "LLC") olf name unusuable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Labbility Company," "L.L.C." or "Li.C.") DE (I'misdiction under the law of which foreign limited hability company is organized) (FE miniser, if applacable) Upon Approval Pare first transacted business in Florida, if prior to registration.) See sections 605-0904 & 605-0909, F.S. to determine peralty liability; 200 Central Avenue, Suite 500 (Street Address of Principal Office) 5 200 Central Ayenue, Suite 500 St. Petersburg FL 33701 St. Petersburg FL 33701 7. Name and street address of Florida registered agent. (P.O. Box. NOT acceptable) C T Corporation System Name 1200 South Pine Island Road Office Address Plantation Florida Registered agent's acceptance: Having been named as registered agent and to occept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered ag James M. Halpin Assistant Secretary 8. The name, title or capacity and address of the person(s) who has have authority to manage is are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: **Authorized Member CCT Group Limited** 200 Central Ave., 5th Floor\_ St. Petersburg-E1, 33701 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b). Porida Statutes. I am aware that any false information submitted in a document to the Department of State constitues a third degre relony as provided for in 4.817.155, F.S. Sumature of an authorized person Daniel L. Montenaro

Typed or printed name at signes

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "INTERACTIVE RESPONSE TECHNOLOGIES,

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE FOURTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

at corn delaware gov/au

Authentication: 201919161

Date: 01-04-18