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- (Business Entity Name)

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	06/21/2024	
	Patrice Rush	
Reference #	<u>#:</u> 2411111	<u></u>
	AMPIAN HR	OUTSOURCING, LLC
☐ Ame ☐ Char	les of Incorporation/Authorization ndment nge of Agent statement	n to Transact Business
☐ Merg ☐ Disso	version ner plution/Withdrawal ious Name r	
Authorized		

COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT:		Ampian HR Ou	tsourcing,	LLC		
Soldici.		Name of Lim	ited Liability	Company	-	•
The enclosed Existence, and	"Application by Fore	eign Limited Liability Company I to register the above reference	for Authoriz d foreign lim	ation to Transacited liability cor	et Business in Florida,' npany to transact busin	Certificate of ness in Florida.
Please return a	ill correspondence co	oncerning this matter to the foll	owing:			
		Name	of Person			
		Firm/	Company			
	_	A	ddress			
		City/State	and Zip Code	<u> </u>	_	
		31.57, 21.000				
		E-mail address: (to be used for	future annua	l report notifica	tion)	
For further info	ormation concerning	this matter, please call:				
	Name of	Contact Person	Area Code	_)	Telephone Number	
	rane or	Contact I CISON	Area Code	Dayinie	relephone rumoei	
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1 41141	nassee, FL 32314			Tallahassee, F	e Center Circle L 32301	
	sed is a check for the make check payabl	following amount: e to: FLORIDA DEPARTME	NT OF STA	TE		
□ s	125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		Filing Fee & ed Copy	\$160.00 Filing I of Status & Cert	

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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA: Ampian HR Outsourcing, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 27-4666060 (Jurisdiction under the law of which foreign limited liability company is organized) (FE! number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) Same 126 W. Sego Lily Dr. (Street Address of Principal Office) (Mailing Address) Sandy Utah 84070 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Cogency Global Inc. Name: 115 North Calhoun St. Suite 4 Office Address: Tallahassee (City) Registered agent's acceptance: Having heen named as registered agent and to accept 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 und 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 agent

Title or Capacity:	Name and Address:		Title or Capacity:		Name and Address:	
Manager	Name: _		Manager	Name:		
⊠Member	Address:	10959 S. Renegade View Lp	⊠ Member	Address: _	1526 W. Ally St.	
Authorized		South Jordan Utah	Authorized	Riverton Utah 84065		
Person		84095	Person			
Other		Other	Other		Other	
Manager	Name:		∐ Manager	Name:		
☐Member	Address:		☐ Member	Address: _		
Authorized			Authorized			
Person			Person			
Other		Other	Other		_Other	
Manager	Name:		☐ Manager	Name:		
Member	Address:		☐ Member	Address: _		
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9. Attached is a certi jurisdiction under th of the translator mus 10. This document is	may be add ficate of c c law of w t be submi	hment to report more than six (6). The ded to the index when filing your Floxistence, no more than 90 days old, defich it is organized. (If the certificate tted) in accordance with section 605,0203 Department of State constitutes a thir	rida Department of State uly authenticated by the c is in a foreign language, (1) (b), Florida Statutes. I	Annual Rep official havi a translation	ort form. ng custody of records in the n of the certificate under oath that any false information	
		Daniel	Shirts			

Typed or printed name of signee





Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

06/20/2024 7894879-016006202024-793976

CERTIFICATE OF EXISTENCE

Registration Number: 7894879-0160

Business Name: AMPIAN HR OUTSOURCING, LLC

Registered Date: January 26, 2011 **Entity Type:** LLC - Domestic

Status: Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



L. Veillette

Leigh Veillette Director Division of Corporations and Commercial Code