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William P. Bray *
Jeffrey A. Long * †
Brendan G. Dillashaw
Charles J. Bridgmon *

Simon J. O'Brien Robert J. Lack

- * Also licensed in South Carolina
- † NC Superior Court Mediator & Certified SC Circuit Court Mediator

November 29, 2017

VIA UPS

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA;

Name of Foreign Limited Liability Company: SQL Sentry, LLC

To Whom It May Concern,

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check for \$125.00 are submitted to register the above referenced foreign limited liability company to transact business in Florida. Please contact our office with any questions or concerns.

Sincerely,

Laura Stefanelli

Paralegal

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	SQL Sentry, LLC				
SUBJE		Name of	Limited Liability Company		
The end Existen	closed "Application by Fore ce, and check are submitted	ign Limited Liability Comp to register the above refere	pany for Authorization to Tra enced foreign limited liability	ansact Business in Florida," Certificate of y company to transact business in Florida.	
Please	return all correspondence co	ncerning this matter to the	following:		
	Laura Stefanelli				
	·	N	ame of Person		
	Bray & Long, Pl	uc			
Firm/Company		!			
2820 Selwyn Ave., Suite 400					
Address				1	
Charlotte, NC 28209					
City/State and Zip Code					
LStefanelli@braylong.com					
		E-mail address: (to be use	d for future annual report no	tification)	
For fur	ther information concerning	this matter, please call:			
	Laura Stefanelli		704 523-77	777	
	Name of	Contact Person		time Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat Clifton E 2661 Exc	CADDRESS: of Corporations tion Section building ecutive Center Circle see, FL 32301		
Enclose	ed is a check for the following \$125.00 Filing Fee	ng amount: \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee. Certificate of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 606 0902, FLORIDA SCATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: L SQL Sentry, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," L.L.C., "or "LLC") (If name unavastable, error alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "1 instead Liability Company," "1, 1, C." or "1,1,0.") 2. Delaware (Assistiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Clair task transacted basiness in Florida, if prior to registration) (See sections 603 0904 & 605 0905; F.S. to determine penalty liabdity) 6. 8936 NorthPointe Executive Park Dr. Ste 200 8936 NorthPointe Executive Park Dr. Ste 200 (Street Address of Principal Office) (Mailing Address) Huntersville, NC 28078 Huntersville, NC 28078 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. Name: 17888 67th Court North Office Address: Loxabatchee Registered agent's acceptance: Having been 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 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 agent. €; Jessica Chappell on behalf of InCorp Services. Inc (Registered agent's agreeare) Ġ 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: Greg Gonzalez Manager 8936 NorthPointe Executive Park Dr., Suite 200 Huntersville, NC 28078 (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). Florida Statutes. I am aware that any 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. Supporter of an authorized person. Greg Gonzalez

Typed or presed name of squee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SQL SENTRY, 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 TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2017.

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You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203626994

Date: 11-27-17