

BU80000000214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

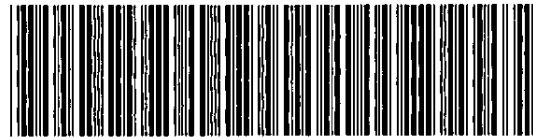
(Business Entity Name)

(Document Number)

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RECEIVED  
08 SEP 30 PM 4: 09  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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08 SEP 30 PM 4: 25  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR  
OCT - 1 2008  
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 730517 7667927  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 1000.00

FILED  
08 SEP 30 PM 4:25  
TALLAHASSEE, FLORIDA

ORDER DATE : September 22, 2008  
ORDER TIME : 11:10 AM  
ORDER NO. : 730517-085  
CUSTOMER NO: 7667927

FOREIGN FILINGS

NAME: ACSYS, LP

*File Second \**

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER: \_\_\_\_\_

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP  
TO TRANSACT BUSINESS IN FLORIDA**

1. ACSYS, LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P.  
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership  
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Georgia

(State or Country of Formation)

3. 9/30/2008

(Date of Formation)

4. Corporation Service Company

(Name of Registered Agent for Service of Process)

5. 1201 Hays Street

(Florida street address for Registered Agent)

Tallahassee, FL 32301

6. 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.

Corporation Service Company

By: 

Signature of Registered Agent

**Troy Todd  
as its agent**

7. 60 Harvard Mill Square, Wakefield, MA 01880

(Principal office address)

8. If limited partnership is a limited liability limited partnership, check box ☐

9. 60 Harvard Mill Square, Wakefield, MA 01880

(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

Vedior General Partner US, LLC

(Name)

60 Harvard Mill Square

(Street Address)

Wakefield, MA 01880

*MUGUUVUUV4328*

60 Harvard Mill Square

(Mailing Address)

Wakefield, MA 01880

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

_____	_____
(Name)	(Street Address)
	_____
	_____
	(Mailing Address)
	_____
_____	_____
(Name)	(Street Address)
	_____
	_____
	(Mailing Address)
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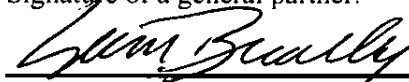
11. Effective date, if other than the date of filing: 9/30/2008.

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 15th day of September, 20 08.

Signature of a general partner:



Vedior General Partner (US) LLC  
By: Vedior Holding US, Inc., Member  
Sean Bradley, Secretary

<b>Filing Fees:</b>	<b>\$1,000.00</b> (\$965 Filing Fee and \$35 Registered Agent Fee)
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

# STATE OF GEORGIA

## Secretary of State

Corporations Division  
315 West Tower  
#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

#### ACSYS, LP

##### Domestic Limited Partnership

was formed or was authorized to transact business on 09/30/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 30th day of September, 2008

Karen C Handel  
Secretary of State