F17000002917

(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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ZOIT JUN 23 PM 4: 60 SECRETARY OF STATE

K. SALY JUN 28 2017

COVER LETTER

TO:	Registration Section Division of Corporations				
CHDI	Alogent l	Holdings, Inc.			
SUD	ECI:	Name of	corporation	- must include suffix	
Dear 9	Sir or Madam:				
"Certi	ficate of Existence		f Good Stan	Authorization to Transac ding" and check are sub- ss in Florida.	
Please Nancy		pondence concerning	g this matter	to the following:	
			Name of I	Person	
Aloge	nt Holdings, Inc.				
350 Te	echnology Parkway	STE 200	Firm/Com	pany	
			Addre	SS	
Peach	tree Corners, GA 3	0092			
	.,		City/State ar	nd Zip code	
nancy.	nunn@alogent.con				
		E-mail address: (to be used f	or future annual report n	otification)
For fu	rther information	concerning this mat	ter, please c	all:	
Nancy	Nunn		404	314-9735	
	Name of Perso		Area Code	Daytime Teleph	none Number
	STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FI	rporations g : Center Circle		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations
Enclos	sed is a check for	the following amou	nt:		
□ \$70	0.00 Filing Fee	□ \$78.75 Filing I Certificate of		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(If name unavaila	ble in Florida, enter alternate corporate n	ame ado	pted for the purpose of transacting	g business in Florida)	
Delaware		36	-4869272		
April 7 2017	under the law of which it is incorporated	i) Do	(FEI number, if apprential	,	
Upon qualification	of incorporation)		(Date of duration, if other t	han perpetual)	
	(Date first transacted busine	0 <mark>7</mark> .1502,	orida, if prior to registration) F.S., to determine penalty liabilit	у)	
·	(Pr	rincipal o	office address)	2011 SEI	
	(Current n address of Florida registered agent: CT Corporation System		ddress, if different) Box NOT acceptable)	JUN 23 PM 4: 1 RETARY OF STA AHASSEE, FLOT	FILEL
Name: Office Address:	1200 South Pine Island Road	· · · · · · · · · · · · · · · · · · ·	_	LORIDA LORIDA	
	Plantation	•	33324 , Florida	·	
	(City)		(Zip code)		
designated in this d further agree to co	nt's acceptance: ed as registered agent and to accept application, I hereby accept the application and the provisions of all status imiliar with and accept the obligation	ointmen ites rela	st as registered agent and agre tive to the proper and comple	ee to act in this capaci te performance of my	ty. I

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

11. Name	s and business addresses of officers and/or directors:
A. DIRE	ctors Dede Wakefield
Chairman:	Dear Waterield
Address: _	Dede Wakefield 2017 JUN 23 PM 4: 00 SEURE TARY SEURE TARY
	350 Technology Parkway STE 200, Peachtree Corners, GA 30092 SEURETARY OF STATE ALL AHASSEE, FLORIDE
Vice Chair	man:
Addiess	
Director:	Nancy Nunn
3	350 Technology Parkway STE 200, Peachtree Corners, GA 30092
Address: _	6,7
-	
Address: _	
B. OFFIC	CERS
President:	Dede Wakefield
3	350 Technology Parkway STE 200, Peachtree Corners, GA 30092
_	
Vice Presid	lent:
Address: _	
_	
Secretary:	Nancy Nunn
-	350 Technology Parkway STE 200, Peachtree Corners, GA 30092
Treasurer:	Nancy Nunn
Address: _	350 Technology Parkway STE 200, Peachtree Corners, GA 30092
NOTE: In	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
· · · · · · · · · · · · · · · · · · ·	Signature of Director or Officer
are true an	er or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S.
13 Nancy	y Nunn, Director & CFO

(Typed or printed name and capacity of person signing application)

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY THAT "ALOGENT HOLDINGS, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN

CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE SEVENTH DAY OF APRIL,

A.D. 2017, AT 4:17 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE CORPORATION IN

QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING MADE ANY

CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

SEURETARY OF STATE OF ALL ANASSES STATE

AND SECTION OF THE PROPERTY OF

Authentication: 202697356

Date: 06-13-17

6372635 8315 SR# 20174709405