F1200003319

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
cert. W17-58480

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17 JUL 24 PH 12: 11
17 JUL 24 PH 12: 11

O SIMMONS JUL 26 2017



July 14, 2017

J. CHRISTOPHER MILLER 11800 AMBER PARK DR ALPHARETTA, GA 30009

SUBJECT: CTS SYSTEMS, INC. Ref. Number: W17000058480

We have received your document for CTS SYSTEMS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 217A00014335

Octavia I Simmons Regulatory Specialist II

PECELVE: 2017 JULE4 AM BE BL SEUKETAR (GF / IA)E ALLAHASSEE, FLORIGA

COVER LETTER

_	stration Section sion of Corporations			
SUBJECT:	CTS Systems, Inc.			
0020201.		ame of corporation	- must include su	ffix
Dear Sir or M	ladam:			
"Certificate of	"Application by Forcigor Existence," or "Certifold Components of the Components of t	ficate of Good Star	nding" and check a	ransact Business in Florida." erc submitted to register the
Please return	all correspondence con	cerning this matte	r to the following:	
J. Christoph	ner Miller			
		Name of	Person	
Law Offices	of J. Christopher Mil	ller, P.C.		
		Firm/Con	npany	· · · · · · · · · · · · · · · · · · ·
11800 Amb	er Park Drive, Suite 1	130		
		Addr	ess	
Alpharetta,	Georgia 30009			
		City/State a	nd Zip code	
cmiller@no	orthfultonwills.com			
	E-mail ad	dress: (to be used	for future annual r	eport notification)
For further in	formation concerning t	his matter, please	call:	
J. Christo	pher Miller	at (679) 746 2000	
Nam	e of Person	at (<u>678</u> Area Cod) <u>746-2900</u> e Daytime	Telephone Number
Regis Divis	EET/COURIER ADD stration Section ion of Corporations	RESS:	Registra Divisior	NG ADDRESS: tion Section of Corporations
2661	on Building Executive Center Circl hassee, FL 32301	e	P.O. Bo Tallahas	x 6327 see, FL 32314
Enclosed is a	check for the following	g amount:		
□ \$70.00 Fil	-	Filing Fee & Cate of Status	\$78.75 Filing Fo Certified Copy	e & \$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 FOLIOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

			
(Enter name of co "Inc.," "Co.," "Co	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
		···	
(If name unavaila		-	iness in Florida)
Georgia			
(State or country	y under the law of which it is incorporated)	(FEI number, if applical	ole)
04/15/2002	5		
(Date of incorporation)		(Date of duration, if other than perpetual)	
June 1, 2017			
	(Date first transacted business in F	lorida, if prior to registration)	- 賞 賞 - T
	(SEE SECTIONS 607.1501 & 607.1502	2, F.S., to determine penalty liability)	24 OF 1
1575 Great O	aks Way, Suite 130, Alpharetta, Georgia	30022	CO: T
	(Principal	office address)	JUL 24 PH 12: 11
			2: 1
	(Current mailing	address, if different)	7
			•
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Paul Barnicoat		
ice Address:	1005 Riverside Drive, E46		
	Palmetto	, Florida _34221	
	(City)	(Zip code)	
	(Enter name of c "Inc.," "Co.," "C (If name unavailated Georgia (State or countres) 04/15/2002 (Date June 1, 2017) Name and street Name:	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name ad Georgia 3. (State or country under the law of which it is incorporated) 04/15/2002 5. (Date of incorporation) June 1, 2017 (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502) 1575 Great Oaks Way, Suite 130, Alpharetta, Georgia 3 (Principal) (Current mailing) Name and street address of Florida registered agent: (P.O. Name: Paul Barnicoat Tice Address: 1005 Riverside Drive, E46 Palmetto	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting bus Georgia (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1575 Great Oaks Way, Suite 130, Alpharetta, Georgia 30022 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Paul Barnicoat 1005 Riverside Drive, E46 Palmetto Palmetto Palmetto Picida 34221

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

(Registered agent's signature)

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. Names and business addresses of officers and/or directors:

A. DIRI	CCTORS
Chairman	Carl Roberts
Address:	11575 Great Oaks Way, Suite 130
-	Alpharetta, GA 30022
Vice Chai	man;
Address:	
Director:	
Address:	
Director:	
B. OFFI	CERS Carl Roberts 11575 Great Oaks Way, Suite 130 Alpharetta, GA 30022
President:	Carl Roberts
Address:	11575 Great Oaks Way, Suite 130
	Alpharetta, GA 30022
Vice Presi	dent: Mark Lewington
Address:	11575 Great Oaks Way, Suite 130
	Alpharetta, GA 30022
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE:	if necessary, you may attack an addendum to the application listing additional officers and/or directors.
The office are true as a third de	Signature of Director or Officer 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. Mark	Lewington, CFO & VP
	(Typed or printed name and capacity of person signing application)

Control Number: 0219964

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brian P. Kemp**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

CTS SYSTEMS, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. 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.

Docket Number : 14762996 Date Inc/Auth/Filed: 04/15/2002 Jurisdiction : Georgia Print Date : 07/20/2017

Form Number : 211



Brian P. Kemp Secretary of State