F170000003733

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certificates of Status				
Special Instructions to Filing Officer: RASIGN WITCOUI				

Office Use Only



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2017 AUG 16 PH 2: 1

S. WARREN AUG 1 8 2017



August 18, 2017

CT CORP

SUBJECT: ARTE USA, INC. Ref. Number: W17000067611

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

MISSING ATTACHED LIST OF DIRECTORS NOTED ON OFFICER PAGE OF FILING

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 417A00017030

Stacey M Warren Regulatory Specialist II

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 17, 2017

CT CORP

SUBJECT: ARTE USA, INC. Ref. Number: W17000067611

i, INC. and the authorization to owever, the documents

We have received your document for ARTE USA, INC. and the authorization to debit your account in the amount of \$78.75. However, the document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Stacey M Warren Regulatory Specialist II

Letter Number: 917A00016867

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 3:1312 850-656-4724

850-508-1891 (cell)

Date:	() \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	g: (
	ACCT. I20160000072	90
Name:	ARTE USA	
Document #:		
Order #:	1060 2773	
Certified Copy of Arts & Amend:		
Plain Copy: Certificate of Good Standing:		
Apostille/Notarial	Country of Destination:	·
Certification:	Number of Certs:	
Filing:	Certified: Plain: COGS:	
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ "7 \ , "7 \"5	
	Thank you!	

COVER LETTER

	ation Section of Corpora				
SUBJECT:	ARTE USA, I	nc.			
SOBOLET	_ 	Name of corpora	ntion - n	nust include suffix	
Dear Sir or Mad	dam:				
"Certificate of I	Existence."	by Foreign Corporation or "Certificate of Good rporation to transact but	Standir	g" and check are sub	et Business in Florida," mitted to register the
Please return al	l correspond	ence concerning this m	atter to	the following:	
Rebecca Saferste	in, Paralegal				
		Nam	e of Per	son	
Amall Golden G	regory LLP				
		Firm/	Compar	ny	
171 17th Street,	NW, Suite 21	00			
		Ą	ddress		
Atlanta. Georgia	30363				
		City/Sta	ate and	Zip code	
tycho.stahl@agg					
		E-mail address: (to be u	sed for	future annual report r	otification)
For further info	rmation con	cerning this matter, ple	ase call		
Rebecca Saferste	ein	21 (404	١	e Daytime Telephone Number	
Name	of Person	Area	Code	Daytime Telepl	none Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a cl	neck for the	following amount:			
□ \$70.00 Filin	ig Fee 🛭	\$78.75 Filing Fee & Certificate of Status		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.

ARTE USA, Inc	: .		
	orporation; must include "INCORPORATED." orp." "Inc.," "Co.," or "Corp.")	" "COMPANY." "CORPORATIO	N."
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transact	ing business in Florida)
2. Delaware 3.		38-4020806	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
4	5.		
(Date	of incorporation)	(Date of duration, if other	er than perpetual)
6. August 1, 2017			
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liab	ility)
1000 Cobb Place	Blvd Building 200. Suite 220, Kennesaw, G.	•	•
/· <u> </u>	(Princi	pal office address)	
	(Current maili	ng address, if different)	•••
8. Name and stree	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	7 AUG
Name:	Name: C T Corporation System		FILD AUG 16 PM 4: 25 (1.1358) E. FI 0:00
Office Address:	1200 South Pine Island Road		
	Plantation	, Florida 33324	25 13.11 03.00
	(City)	(Zip code)	¥

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.

C T Corporation System

By: Michael Jones. Assistant Secretary

(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. DIRECTORS	
Chairman: See attached list.	
Address:	
Vice Chairman:	
Address:	
	
Director:	
Address:	
	· · · · · · · · · · · · · · · · · · ·
Director:	
Address:	7.7 7
	-
B. OFFICERS	(2) 6 F
Philippe Desart	20 R
1000 Cohh Place Blyd Building 200 Suite 220 Kennesaw GA 30144	
Address:	25
	
Vice President: Bill Calhoun	
Address: 1000 Cobb Place Blvd., Building 200, Suite 220, Kennesaw, GA 30144	
Secretary: Peter Verheyen	
Address: 1000 Cobb Place Blvd., Building 200. Suite 220, Kennesaw, GA 30144	
Peter Verheyen	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional P	al officers and/or directors.
12. Bill Calhoun Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 11 above) are true and that he or she is aware that false information submitted in a document to a third degree felony as provided for in s.817.155, F.S.	affirms that the facts stated herein the Department of State constitutes
Bill Calhoun, Vice President	

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

Attachment to Application by Foreign Corporation for Authorization to Transact Business in Florida
For
ARTE USA, Inc.

11: Directors

Philippe Desart, 1000 Cobb Place Blvd., Building 200, Suite 220, Kennesaw, GA 30144 Bill Calhoun, 1000 Cobb Place Blvd., Building 200, Suite 220, Kennesaw, GA 30144 Peter Verheyen, 1000 Cobb Place Blvd., Building 200, Suite 220, Kennesaw, GA 30144

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Page 1



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

DELAWARE, DO HEREBY CERTIFY "ARTE USA, INC." IS DULY INCORPORATED

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

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FIFTEENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 203063057

Date: 08-15-17