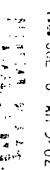
F2000003005

(Re	equestor's Name)		
(Ac	ddress)	· · · · · · · · · · · · · · · · · · ·	
(Ac	ddress)		
(C	ity/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to	Filing Officer		

Office Use Only



600347208336



韓 JUL-6 新 9:02

(4) TELL TO THE 25

'JUL -7 2020 M. SOLOMON



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301

P: 866.625.0838 F: 866.625.0839

COGENCYGLOBAL.COM

Account#: I20000000088

Date:_	07/06/2020	
Name:	Chris Vick	_
Refere	ence #: 1240102	
	Name: TAILORED BUS	INESS SYSTEMS, INC.
V	Articles of Incorporation/Authorization	to Transact Business
	Amendment .	
	Change of Agent	*PLEASE FILE SECOND*
	Reinstatement	
	Conversion	
	Merger	
	Dissolution/Withdrawal	
	Fictitious Name	
	Other	
Author Signat	rized Amount: \$70.00	

F: 800.944.6607

+44 (0)20.3961.3080

COVER LETTER

C11111 111 2 1101	-	Failored Busine	ess Systems, Inc.	
SUBJECT:			ust include suffix	
Dear Sir or Madam:				
"Certificate of Exist	cation by Foreign Co ence," or "Certificate eign corporation to tr	of Good Standin	g" and check are sub	ct Business in Florida," omitted to register the
Please return all cor	espondence concerni	ng this matter to	the following:	
		Lori Hall		
•	***************************************	Name of Per	SON	
	c/o Tailo	red Business	Systems, Inc.	
		Firm/Compar	у	
	10	2 W 3rd St., S	te. 750	
· · · · · · · · · · · · · · · · · · ·		Address		
	Win	ston-Salem, N	27101	
		City/State and	Zip code	
		l@harriscompi		
	E-mail address	: (to be used for	uture annual report i	notification)
For further informat	ion concerning this m	atter, please call		
Lori	Hall	at (336)	397-5300	x64345
Name of Pe		Area Code	Daytime Telep	hone Number
STREET/C Registration	OURIER ADDRESS	S:	MAILING A Registration S	
	Corporations		Division of Co	orporations
Clifton Building 2661 Executive Center Circle		P.O. Box 6327 Tallahassee, FL 32314		
Z661 Execu Tallahassee			rananassee, r	L 32314
Enclosed is a check	for the following amo	ount:		
×1 \$70.00 Filing Fe	c [_] \$78.75 Filing Certificate o	-	78.75 Filing Fee & ertified Copy	** \$87.50 Filing Fee, Certificate of Status of 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.

	Tailored Business Sys	stems, Inc		
	rporation; must include "INCORPORATED," "Corp." "Inc," "Co," or "Corp.")	OMPANY,"	"CORPORATION,"	
(If name unavailal	ole in Florida, enter alternate corporate name adopt	ted for the pu	rpose of transacting busi	iness in Florida)
	Georgia 3		58-1164021	
(State or country	under the law of which it is incorporated)	<u></u>	(FEI number, if applicab	ole)
_	June 11, 1973 _{5.}			
	of incorporation)	(Date o	f duration, if other than p	perpetual)
	(Date first transacted business in Flor (SEE SECTIONS 607.1501 & 607.1502, I			
	900 Block Plaza, 900 Ea	st Main St	reet	
	(Principal of	fice address)		
	EASLEY, SC 2	9640		
	(Current mailing ad	dress, if diffe	erent)	الميود من
. Name and <u>stree</u>	address of Florida registered agent: (P.O. Bo	ox <u>NOT</u> ace	ceptable)	930-1884* 970-1891 1891-1891
Name:	COGENCY GLOBAL INC.	-		<u>" (</u>
ffice Address:	115 North Calhoun Street, Suite 4	=		
	Tallahassee	Florida _	32301	a Pin
	(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.

Marisa Kugelmann 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:	JEFF BENDER		
	1 ANTARES DR, STE 400, OTTAWA, ON K2E 8C4		
Address:			
		par rybe	23
Address:		-	<u></u>
		9. p.	: ا -د ئ
Director:		/ [A]	: <u>ح</u>
		e *	Ö
		4.5	02
B. OFFICERS			
	JEFF BENDER		
Address:			
Address:	AMANDA NEALE 1 ANTARES DR, STE 400, OTTAWA, ON K2E 8C4		
<u> </u>	TODD BIGUARDSON		
Secretary:			
Address:	1 ANTARES DR, STE 400, OTTAWA, ON K2E 8C4		
Treasurer:			-
Address:			
	ou may attach an addendum to the application listing additional officers and/or		
12			
The officer or director s are true and that he or s	Signature of Director or Officer signing this document (and who is listed in number 11 above) affirms that the factor is aware that false information submitted in a document to the Department of provided for in s.817.155, F.S.	cts stated he	rein
13	TODD RICHARDSON, SECRETARY		

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

Control Number: H304796

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, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

TAILORED BUSINESS 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 : 19241545 Date Inc/Auth/Filed: 06/12/1973 Jurisdiction : Georgia Print Date : 07/06/2020

Form Number : 211



Brad Rafforsperger

Brad Raffensperger Secretary of State