

F22000003072

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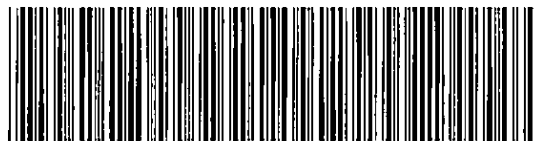
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OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

MAY 17 2022

K. Brumbley

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 05/13/2022

Acc#I20160000072

mic DW

Name:	Behaviosec Inc.
Document #:	
Order #:	14327835

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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Amount: \$ 220.00

Thank you!

**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.*

1. Behaviosec Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 352602624
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 08/07/2017 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. 1/1/2021
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1000 ALDERMAN DR, Alpharetta, GA 30005
(Principal office street address)

1105 North Market St., Suite 501, Wilmington, DE 19801
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

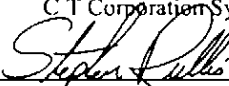
Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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:  Stephen Rullis, VP & Asst. Secy.
(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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A. DIRECTORS

☐ Chairman Name: SEE ATTACHMENT

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. Renee Simonton
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Renee Simonton, Vice President
(Typed or printed name and capacity of person signing application)

Director and Officers Report - Work Address Behaviosec Inc.

Company Name

1 Behaviosec Inc.

Appointments

Name	Appointed as	Work address
Mark Vickers Kelsey	Director	1000 Alderman Drive, Alpharetta GA 30005, United States
Kenneth Robert Thompson, II	Director	9443 Springboro Pike, Miamisburg OH 45342, United States
Mark Vickers Kelsey	President	1000 Alderman Drive, Alpharetta GA 30005, United States
Mary Ann Horgan	Vice President	313 Washington Street, Suite 400, Newton, MA, 02458, US
Renee Simonton	Vice President	1105 N. Market Street, Fifth Floor, Wilmington DE 19801, United States
Renee Simonton	Secretary	1105 N. Market Street, Fifth Floor, Wilmington DE 19801, United States
Suzanne Michelle Perry	Treasurer	1-3 Strand, London, WC2N 5JR, United Kingdom
Mary Ann Horgan	Assistant Treasurer	313 Washington Street, Suite 400, Newton, MA, 02458, US
Terrence E. Stone	Assistant Treasurer	313 Washington Street, Suite 400, Newton, MA, 02458, US

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BEHAVIOSEC 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 TWELFTH DAY OF MAY, A.D. 2022.

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.



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Jeffrey W. Bullock, Secretary of State

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