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DATE:

08/11/2011

NAME:

TA PROCESS SYSTEMS LLC

TYPE OF FILING: APPLICATION BY FOREIGN LLC TO TRANSACT BUSINESS IN FLORIDA

COST:

\$160

RETURN: CERTIFICATE OF STATUS & CERTIFIED COPY

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:	Registra Division	ation Section on of Corporations	7
CI ID II	n em	TA DDOCESS SVOTEMS LLC	•
SUBJI	ECT:	TA PROCESS SYSTEMS, LLC Name of Limited Liability Company	
		Name of Limited Diability Company	•
The en Exister	closed "Ap	pplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," heck are submitted to register the above referenced foreign limited liability company to transact busin	' Certificate of ness in Florida
Please	return all c	correspondence concerning this matter to the following:	
		BILLY DE NAPOLI	
		Name of Person	
	-	BAY STATE CORPORATE SERVICES, INC.	
		Firm/Company	
	_	6 BEACON STREET, SUITE 510	
		Address	
	BOSTON, MA 02108 City/State and Zip Code		
	_	MMCKENZIE@TECHNICALASSOCIATES.COM	
		E-mail address: (to be used for future annual report notification)	
For fur	ther inforn	mation concerning this matter, please call:	
		BILLY DE NAPOLI at (617) 742-8484	
		Name of Person Area Code & Daytime Telephone Number	
	Division Registrate P.O. Box	ssee, FL 32314 2661 Executive Center Circle	
Enclo		Tallahassee, FL 32301 check for the following amount: .00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy of Status & Certified	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	ES, THE FOLLOWING IS SUMMITTED TO REGISTER A FOREIGN STATE OF FLORIDA:
1. TA PROCESS (Name of Poreign Limited Liability Company; must inclu	SYSTEMS, LLC
(Name of Poreign Limited Liability Company; must inclu	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	se of transacting business in Florida and attach a copy of the written must name. The atternate name must include "Limited Liability
2. GEORGIA 3	27-2026233
2. GEORGIA (Jurisdiction under the law of which foreign limited liability company is organized)	·
4. 02/09/2010 5	PERPETUAL (Duration: Year limited liability company will cease to
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Pic (See sections 608.501 & 608.502 F.S.	orida, if prior to registration.) to determine penalty liability)
7. 3650 KENNESAW 75 PARKWAY, SUITE 100	
KENNESAW, GA 30144	
(Street Address	of Principal Office)
8. If limited liability company is a manager-managed	company, check here
9. The name and usual business addresses of the mana	aging members or managers are as follows:
SEE ATTACHED	
,	
10. Attached is an original certificate of existence, no more than 90 of the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under eath of the translator must be subm	lays old, duly authenticated by the official having custody of records in y is not acceptable. If the certificate is in a foreign language, a nitted.)
11. Nature of business or purposes to be conducted or	promoted in Florida:
MANUFACTURING AND INSTALLATI	ON OF PROCESSING EQUIPMENT .
Jan Ch	<u>-</u>
Signature of a member or an au (in accordance with section 608.408(3), F. an affirmation under the penalties of periods.	thorized representative of a member. S., the execution of this document constitutes bury that the facts stated herein are true.)
	N IRVIN
Typed or printed	name of signee

TA PROCESS SYSTEMS, LLC

Name, Title and address of Managers

John Hogue, Manager 3650 Kennesaw 75 Parkway, Suite 100 Kennesaw, GA 30244

Graham Thompson, Manager 2423 Westgate Drive Albany, GA 31707

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE				
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA. 1. The name of the Limited Liability Company is: TA PROCESS SYSTEMS, LLC				
1. The name of the Limited Liability Company is:				
TA PROCESS SYSTEMS, LLC				
If unavailable, the alternate to be used in the state of Florida is:				
2. The name and the Florida street address of the registered agent and office are: NRAI Services, Inc. (Name)				
515 East Park Avenue				
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Tallahassee FL 32301 City/State/Zip				
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. NRAI Services, Inc. By: William L. De Napoli, Assistant Secretary				
\$ 100.00 Filing Fee for Application				

\$ 25.00 \$ 30.00

5.00

Designation of Registered Agent

Certified Copy (optional) Certificate of Status (optional)

Control No. 10010252

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

TA PROCESS SYSTEMS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 02/10/2010 in Georgia. 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



WITNESS my hand and official scal of the City of Atlanta and the State of Georgia on 28th day of June, 2011

B: P.L.

Brian P. Kemp Secretary of State

Certification Number: 7580726-1 Reference: Verify this certificate online at http://corp.scs.state.ga.us/corp/scskb/verify.asp