

M13000000813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2017 FEB -6 AM 9:47
MILLIGAN

M. MILLIGAN
FEB 09 2017

WIT-7093



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2017 FEB -6 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 25, 2017

JAMILIA N SMITH
5 CONOURSE PARKWAY STE 500
ATLANTA, GA 30328

SUBJECT: SOFTWARE PARADIGMS INTERNATIONAL GROUP, LLC
Ref. Number: M13000000813

We have received your document for SOFTWARE PARADIGMS INTERNATIONAL GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 817A00001596

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Software Paradigms International Group, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jamilia N. Smith

Name of Person

Softvision, LLC

Firm/Company

5 Concourse Parkway Ste. 500

Address

Atlanta, GA 30328

City/State and Zip Code

spitax@spi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jamilia N. Smith

Name of Person

at (770) 904-7720

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Software Paradigms International Group, LLC

Enter new principal office address, if applicable: _____

(Principal office address

MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address

MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M13000000813

3. Jurisdiction of its organization: Georgia

4. Date authorized to do business in Florida: 02/06/2013

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Softvision, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, **Florida** _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Siddhartha Mookerji</u>	_____	<input type="checkbox"/> Add
		_____	<input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>SPI Holdco, LLC</u>	<u>5 Concourse Plwy. St 500</u>	<input checked="" type="checkbox"/> Add
		<u>Atlanta, GA 30328</u>	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the
aforementioned amendment(s), duly authenticated by the official having custody of records in the
jurisdiction under the law of which this entity is organized.

Jamilia N. Smith
Signature of the authorized representative
Jamilia N. Smith
Typed or printed name of signee

Filing Fee: \$25.00

2017 FEB -6 AM 9:47
FILED

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF AMENDMENT

NAME CHANGE

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

SOFTWARE PARADIGMS INTERNATIONAL GROUP, LLC

a Domestic Limited Liability Company

has filed articles/certificate of amendment in the Office of the Secretary of State on 11/07/2016 changing its name to

Softvision, LLC

a Domestic Limited Liability Company

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta,
and the State of Georgia on 11/02/2016



B. P. Kemp

Brian P. Kemp
Secretary of State

2017 FEB -6 AM 9:47

ARTICLES OF AMENDMENT

Electronically Filed

Secretary of State

Filing Date: 10/31/2016 3:47:06 PM

Article 1

Business Name : SOFTWARE PARADIGMS INTERNATIONAL GROUP, LLC

Control Number : 08005837

Article 2

The date the articles of organization were filed was: 01/22/2008

Article 3

The entity hereby adopts an amendment to change its name to the following new business name:

New Business Name : Softvision, LLC

Effective Date : 11/07/2016

Authorizer Information

Authorizer Signature : Jamilia Smith

Authorizer Title : Attorney In Fact

2017 FEB -6 AM 9:48

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

Softvision, LLC

a **Domestic Limited Liability Company**

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	: 13904495
Date Inc/Auth/Filed	: 01/22/2008
Jurisdiction	: Georgia
Print Date	: 01/24/2017
Form Number	: 211



B. P. Kemp

Brian P. Kemp
Secretary of State