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	Division of Co	rporations			
	Fax Number	: (850)617-63B3		C. L. B	F.5
			•	17.	
From:					
	Account Name	: TRIAD PROFESSIONAL SE	RVICES	41.12	<b>I</b>
	Account Number	: I20160000008	• .	***	
	Phone	: (850)777-2091	1	1900	1
	Fax Number	: (770)220-1943		0.73	N
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			ne amail address please.**		
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LLC AMND/RÉSTATE/CORRECT OR M/MG RESIGN **AXIOM ENERGY SOLUTIONS LLC** 

Certificate of Status	0
Certified Copy	1
Page Count	07
Estimated Charge	\$55.00

Corporate Filing Menu

Electronic Filing Menu

(((H18000137644 3)))

### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Axiom Energy Solutions LLC	
	Limited Liability Company
Dear Sir or Madam:	· · · · · · · · · · · · · · · · · · ·
The enclosed application, certificate and fee(s) ar	e submitted ित filing.
Please return all correspondence concerning this	matter to the following:
Elissa Hart	
Name of Person	
Smith, Gambrell & Russell, LLP	
Firm/Company	
1230 Peachtree St. NE, Suite 3100	
Address	······································
Atlanta, GA 30309	
City/State and Zip Code	**************************************
ehart@sgrlaw.com	and the control of th
E-mail address: (to be used for future annual re	eport notification)
	Ö!
For further information concerning this matter, pl	ease call:
Elissa Hart	. 404 815-3500
Name of Person	Area Code 2 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  CR2E055 (9/15)	S55 Filing Fee & S60 Filing Fee, Certified Copy Certificate of Status & Certified Copy

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(((H18000137644 3)))

### APPLICATION BY FOREIGN LIMITED L'ABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

# SECTION I (1-4 must be completed)

Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		<del> </del>	
Enter new mailing address, if applicable:	n/a		
(Mailing address MAY BE A POST OFFICE BOX)			<b>₩</b> order'i
2. The Florida document number of this limited liab	ility company is M13000005023	34 SK	granton (1970) granton
	, i	90 II 100	∯ genet_k-s,
3. Jurisdiction of its organization: Georgia		<u> </u>	incomes.
4. Date authorized to do business in Florida:	9/2013		A second
SECTION II (5-9 complete only the applicable of	č.	8	
	Ric Holdings, LLC		
(must	contain "Limited Liability Company, ""L.L	.C.," or "LLC."	)
(If name unavailable, enter alternate name adopted a copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C.	aging members adopting the alternate name.		
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	officer address on our records, enter the na	me of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Inter-Florido Street Addre	253	
	, Florida .	Zip Code	

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

100

		accordance with 605.0902 (1)(e), indic	cate that change:
Title/ Capacity	Name	Address	Type of Action
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			Remove
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			Rembye
			Add / grans
		<u>.</u>	Remove
		,	Add
			Remove
aforementioned arr	ficate, if required: no more than 9 nendment(s), duly authenticated be the law of which this entity is org	y the official having custody of recor	rds in the
		f the authorized representative ony Tippins	

Filing Fee: \$25.00

(((H180001376443)))

Control Number: 13408878

## 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

Axiom Energy Solutions LLC
a Domestic Ismitted Lightle Company

has filed articles/certificate of artiendment in the Office of the Secretary of State of 15/01/2018 changing its name to

TipRic Holdings: LLC
a Damestic Limited Liability Company

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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 to inficate of amendment.

WITNESS my hand and official seal in the City of Atlanta

Co Manager



B: P. Kemp Secretary of State

(((H18000137644 3)))

### ARTICLES OF AMENDMENT

\*Electronically Filed\* Secretary of State

Filing Date: 5/1/2018 9:47:28 AM

**Business Name** 

: Axiom Energy Solutions LLC

Control Number

: 13408878

The date the articles of organization were filed was: 05/03/2013

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

New Business Name

: TipRic Holdings, LLC

Effective Date

: 05/01/2018

Authorizer Signature: Anthony Tippins

Authorizer Title: Manager

(((H180001376443)))

Control Number: 13408878

## 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

To Ric Holdings, LLC

was formed in the jurisdiction stated below or was authorized in transact ousiness in Georgia on the below date. Said entity is in compliance with the amplicable filling 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, at 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 purequant to Fitte 14 of the Official Code of Georgia Amnotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 15771489
Date Inc/Auth/Filed: 05/03/2013
Jurisdiction : Georgia
Print Date : 05/02/2018
Form Number : 211

Form Number : 211



Brian P, Kemp Secretary of State



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FOLEY & LARDNER

Account Number : I19980000047

Phone

: (407)423-7656

Fax Number

: (407)648-1743

### LLC DISSOLUTION OR WITHDRAWAL LSQ PARTICIPATION PARTNERS I GP, LLC

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Certified Copy		0
Page Count		02
Estimated Charge		\$25.00

Electronic Filing Menu

Corporate Filing Menu

# NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

	(Name of limited liability company)	<del></del> .
Delaware	(Large of Mills)	22
<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	(Jurisdiction of its organization):	
Aŭgust 25, 26	16	ro P
	(Date registered with Florida Department of State)	\$ <b>9€</b>
M160000065	) <del>"</del>	
	(Florida Dogument Anniber).	Pr. 2
(If an effect more than 9 Note: If the	ate, if other than the date of filing:  ive date is listed, the date must be specific and cannot be prior to cool days after filing.)  date inscreden this block does not meet the applicable statutory for the listed as the document's effective date on the Department.	älingsæquirements;
	(Signature of authorized represcutative)	<del>vije like a</del> ."
	(S)gnature of authorized representative)	
	Daniel Ambrico	
	***	

Filing Fee: \$25.00

Service de per