

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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ACCOUNT NO. : 12000000195

REFERENCE : 865361

65361 792511

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: October 30, 2013

ORDER TIME : 9:40 AM

ORDER NO. : 865361-001

CUSTOMER NO: 7925111

FOREIGN FILINGS

NAME: VEILED TECHNOLOGIES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

2010 DEC -9 PM 12: 01
SECRITARY OF STAFE
FALLAHASSEE FLORIDA

345341



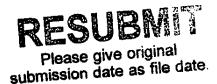
FLORIDA DEPARTMENT OF STATE **Division of Corporations**

December 10, 2013

CSC SUSIE KNIGHT

SUBJECT: VEILED TECHNOLOGIES, LLC

Ref. Number: W13000067396



Letter Number: 413A00028037

13 DEC 18 ME VI 13

We have received your document for VEILED TECHNOLOGIES, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The ofollowing suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC".

The document number of the name conflict is L11000077879.

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.

Deborah Bruce Regulatory Specialist II

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: VEILED TECHNOLOGIES, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") VEILED TECHNOLOGIES OF DELAWARE, 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 include "Limited Liability Company," "L.L.C," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 07/16/2013 Perpetual (Duration: Year limited liability company will cease to (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 17633 Gunn Highway Hwy #188 Odessa, FL 33556 (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 managing members or managers are as follows: Peter W. Rung 17633 Gunn Highway Hwy #188 Odessa, FL 33556 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: SECURITY SOFTWARE Signature of a member or an authorized representative of a member. (In accordance with section 608,408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.) Peter W. Rung Typed or printed name of signee

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 Comp	any is:			
If unavailable, the alternate to be used in the	e state of Florida is:			
VEILED TECHNOLOGIES OF DELAN	WARE, LLC			
2. The name and the Florida street address	of the registered agent and office are:			
Corporation Service Compar	ny			
-07	(Name)			
1201 Hays Street		<u> </u>	2013 2013	en faces
Florida Street Add	dress (P.O. Box NOT ACCEPTABLE)		330	ľ
Tallahassee	32301 FL	SSE SSE	-9	anda Sentence
Having been named as registered agent and	City/State/Zip	EE SIAT	PM 12: 0	i (Marian

Having been named as registered agent and to accept service of process for the above stated limited is 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.

Corporation Service Company

By:

Assistant Vice President

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing VEILED TECHNOLOGIES, LLC		
· · · · · · · · · · · · · · · · · · ·		
Members of	 7	
a limited liability company duly organized and existing under the laws of DELAWARE		
(State or Country of Organization)		
Because the name of this foreign limited liability company does not satisfy the		
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the	ıc	
following name to transact business in the state of Florida:		
VEILED TECHNOLOGIES OF DELAWARE, LLC	2013	and Zenes
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)) LAH 0.000	
12/17/2013 Date:	-9 ASS	Taram.
Signature(s) of Manager(s) and/or Managing Member(s):	PM 12: 01 Y OF STATE SEE FLORIDA	TT.
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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VEILED TECHNOLOGIES, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRTIETH DAY OF OCTOBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VEILED TECHNOLOGIES, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5367446 8300

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Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 0855004

DATE: 10-30-13

You may verify this certificate online at corp.delaware.gov/authver.shtml