Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007 Phone

: (702)866-2500

Fax Number

: (702)866-2689

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: documents @ incorp. com

 $\ddot{\omega}$ 

### Foreign Limited Liability Company **Demand Solutions, LLC**

Certificate of Status	18 0	
Certified Copy	1	
Page Count	05	
Estimated Charge	\$155.00	

M. MILLIGAN EXAMINER

SEP 19 2014

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Corporate Filing Menu

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#### **COVER LETTER**

	Registration Section Division of Corporation	\$			
SUBJEC	·T.	Demand	Solutions, LLC		
BUDDEC	·•i	Name of Limit	d Liability Company		-
The engle Existence	osed "Application by For c, and check are submitte	eign Limited Liability Com d to register the above refer	pany for Authorization to Tr enced foreign limited liabili	manact Business in Florida, ty company to transact busi	" Certificate of ness in Florida
Please re	turn all correspondence c	oncerning this matter to the	following:		
		Ni	cole Garda		
		N	ame of Person		
		InCor	o Services, Inc.		
	<del></del>	F	ігш/Сошрнцу	·	
2360 Corporate Circle - Suite 400					
			Address		
		Henderso	n, NV 89074-7739		
	<del></del>	City/S	into and Zip Code		
			ents@incorp.com		
		·	d for future annual report notilli	cation)	-
For furthe	er information concerning	g this matter, please call:			
	Nicole Garcia for Ir	Corp Services, Inc.	702	866-2500	
	Name o	f Contact Person	Area Code D	aytime Telephone Number	•
] ] 1	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallshassee, FL 32314	Divisio Registr Clifton 2661 E	ET ADDRESS:  n of Corporations  ation Section  Building  xecutive Center Circle  ssee, FL 32301		
	d is a check for the for \$125.00 Filing Fee	ollowing amount:  \$130.00 Filing Fee & Certificate of Status	■ \$155,00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, C of Status & Certified	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate name adopted for the purpose of a sbility Company," "L.L.C." or "L.L.C.")	ransacting business in Florida. The alternate name must include "Limited
Delaware	<sub>3</sub> 46-3474912
Jurisdiction under the law of which foreign ilmited liability company is organized)	(PUI number, if applicable)
Upon Registration	
(Date first transacted business in (Seo sections 605.0904 & 605,0905	Florida, if prior to registration.) F.S. to determine penalty liability)
8300 Powers Ferry Rd ste. 600-130	SE SE
Atlanta, GA 30339	
(Street Addres	of Principal Office)
6300 Powers Ferry Rd ste. 600-130	
Atlanta, GA 30339	2
	ing Address)
(Mail	
(Mail)  The name, title or capacity and address of the pen	son(s) who has/have authority to manage is/are:
The name, title or capacity and address of the pen	son(s) who has/have authority to manage is/are:
The name, title or capacity and address of the pen	son(s) who has/have authority to manage is/are:
The name, title or capacity and address of the pen	son(s) who has/have authority to manage is/are:
The name, title or capacity and address of the pen	son(s) who has/have authority to manage is/are:
(Maill The name, title or capacity and address of the pen ddisons Auto LLC, Managing Member, 6300 Powe	son(s) who has/have authority to manage is/are: rs Ferry Rd ste. 600-130, Atlanta, GA 30339
(Maill  The name, title or capacity and address of the pen ddisons Auto LLC, Managing Member, 6300 Powe  Attached is an original certificate of existence, no	son(s) who has/have authority to manage is/are: rs Ferry Rd ste. 600-130, Atlanta, GA 30339  more than 90 days old, duly authenticated by the official
Maill The name, title or capacity and address of the pendicisons Auto LLC, Managing Member, 6300 Power Attached is an original certificate of existence, no riving custody of records in the jurisdiction under the ceptable. If the certificate is in a foreign language, is	son(s) who has/have authority to manage is/are: rs Ferry Rd ste. 600-130, Atlanta, GA 30339  more than 90 days old, duly authenticated by the official
Maill  The name, title or capacity and address of the pendicisons Auto LLC, Managing Member, 6300 Power  Attached is an original certificate of existence, no riving custody of records in the jurisdiction under the ceptable. If the certificate is in a foreign language, in	son(s) who has/have authority to manage is/are: rs Ferry Rd ste. 600-130, Atlanta, GA 30339  more than 90 days old, duly authenticated by the official blaw of which it is organized. (A photocopy is not
(Maill  The name, title or capacity and address of the pendidisons Auto LLC, Managing Member, 6300 Powe  Attached is an original certificate of existence, no riving custody of records in the jurisdiction under the ceptable. If the certificate is in a foreign language, is	son(s) who has/have authority to manage is/are: rs Ferry Rd ste. 600-130, Atlanta, GA 30339  more than 90 days old, duly authenticated by the official blaw of which it is organized. (A photocopy is not
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Attached is an original certificate of existence, no riving custody of records in the jurisdiction under the ceptable. If the certificate is in a foreign language, it is be submitted)  Signature of a secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this document compared to the secondance with section 601,0203, P.S., the exceptage of this secondance with section 601,0203, P.S., the exceptage of the secondance with section 601,0203, P.S., the exceptage of this secondance with section 601,0203, P.S., the exceptage of the first f	son(s) who has/have authority to manage is/are: are Ferry Rd ste. 600-130, Atlanta, GA 30339  more than 90 days old, duly authenticated by the official atlanta of which it is organized. (A photocopy is not a translation of the certificate under oath of the translation authorized person stitutes an atlimation under the penalties of perjury that the facts stated herein as
Attached is an original certificate of existence, no reving custody of records in the jurisdiction under the ceptable. If the certificate is in a foreign language, the submitted)  Signature of a secondance with section 605,0203, F.S., the exception of this document come aware that any folse information submitted in a document to the Department	son(s) who has/have authority to manage is/are: are Ferry Rd ste. 600-130, Atlanta, GA 30339  more than 90 days old, duly authenticated by the official atlanta of which it is organized. (A photocopy is not a translation of the certificate under oath of the translation authorized person stitutes an atlimation under the penalties of perjury that the facts stated herein as

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:		
Demand Solu	utions, LLC	<del></del>
If unavailable, the alternate to be used in the state of	f Florida is:	
2. The name and the Florida street address of the re	egistered agent and office are:	A & T
' InCorp Ser	rvices, Inc.	
(Na	me)	0. The
17888 67th (	Court North	19 6
Florida Street Address (P.C	D. Box NOT ACCEPTABLE)	OF S
Loxahalchee	33470 FL	K.B.
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 605, Florida Statutes.

Nicole Garcia on behalf of Incorp Services, Inc.

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

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "DEMAND SOLUTIONS, 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 EIGHTEENTH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DEMAND SOLUTIONS, LLC" WAS FORMED ON THE EIGHTH DAY OF FEBRUARY, A.D. 2013.

14 SEP 18 MID 47
SECRETAST OF STATE

5286720 8300

141192791

You may verily this certificate coline at corp.delaware.gov/authver.shtml AUTHENTICATION: 1707765

DATE: 09-18-14