

**MIL00004177**

**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.**

(((H16000129600 3)))



H160001296003ABCZ

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

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

**Email Address:** \_\_\_\_\_

**Foreign Limited Liability Company  
iS3 Tech Services, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 MAY 25 A 11:22

**FILED**

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

MAY 26 2016  
J. BRUCE

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: IS3 Tech Services, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Tammy Holcombe and/or Adam Hammock

Name of Person

IS3 Tech Services, LLC

Firm/Company

1650 Oakbrook Drive, Suite 475

Address

Norcross, Georgia 30093

City/State and Zip Code

THOLCOMBE@is3tech.com

AHAMMOCK@is3tech.com

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

For further information concerning this matter, please call:

Tammy Holcombe

Name of Contact Person

at ( 770 )

Area Code

855-6999

Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

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

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

2016 MAY 25 AM 11:22  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. **IS3 Tech Services, LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. **Georgia**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **46-3821638**

(FEF number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0901 & 605.0902, F.S. to determine penalty liability)

5. **1650 Oakbrook Drive, Suite 475**

**Norcross, Georgia 30093**

(Street Address of Principal Office)

6. **1650 Oakbrook Drive, Suite 475**

**Norcross, Georgia 30093**

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **C T Corporation System**  
Office Address: **1200 South Pine Island Road**  
**Plantation** , Florida **33324**  
(City) (Zip code)

Registered agent's acceptance:

*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 application, 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.*

By: **C T Corporation System** *Carrie Bryan*  
(Registered agent's signature) (Regt)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**Adam Hammock-CEO, 1650 Oakbrook Dr, Ste 475, Norcross, GA 30093**

**Tammy Holcombe-Controller, 1650 Oakbrook Dr, Ste 475, Norcross, GA 30093**

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

*Tammy Holcombe*  
Signature of authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.817.135, F.S.

**Tammy Holcombe**

Typed or printed name of signer

FILED  
2016 MAY 25 A 11:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Control Number : 13466686

# 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

**IS3 Tech Services 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	: 13183973
Date Inc/Auth/Filed	: 10/09/2013
Jurisdiction	: Georgia
Print Date	: 05/25/2016
Form Number	: 211



*B. P. Kemp*

Brian P. Kemp  
Secretary of State