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(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(9		
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
		
Special Instructions to	Filing Officer:	
		:
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08/02/18--01019--015 **125.00

08/10/16--01005--001 **638.75

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TO THE CONTROL OF STATE

TO





FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2016

CT CORPORATION SYSTEM

SUBJECT: ARDENT SUPPORT TECHNOLOGIES, LLC

Ref. Number: W16000053546

SECRETARY OF STATE

We have received your document for ARDENT SUPPORT TECHNOLOGIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$638.75.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 416A00016244

RE-SUBMIT
Please retain original filing date of submission _S//_

www.sunbiz.org

Ardent Support Technologies, LLC

() Nonprofit	_	
() Foreign	() Amendment	() Merger
() Limited Partnership	() Dissolution/Withdrawal	() Mark
(X) LLC	() Reinstatement	
Qualification	() Annual Report	() Other
	() Name Registration	
() Certified Copy	() Fictitious Name	() UCC
() Call When Ready		() CUS
(x) Walk In	() Photocopies	
() Mail Out		() After 4:30
	() Call If Problem	(x) Pick Up
Name	() Will Wait	
Availability		
Document	8/2/2016	Order#:
Examiner		10106745
Updater	KM	
Verifier		Ref#:
W.P. Verifier		
		Amount: \$

COVER LETTER

Division of Corporation	S '					
SUBJECT: Aident Support Tech	mologies, LLC					
		Limited Liability Company				
The enclosed "Application by Fore Existence, and check are submitted						
Please return all correspondence of	oncerning this matter to the	tollowing:				
Laurer	n Janousek					
	N	ame of Person	······································			
Ardent Su	pport Technologies	s, LLC				
12 Cro	sby Road	irm/Company		-		
		∧ddress		i		
Dover, NH	03820			A I	16	
	City/s	State and Zip Code		CAE	AUG	П
łaurenj@ardentsu	pporttech.com				ري	=
	E-mail address: (to be use	d for future annual report not	ification)			Ш
For further information concerning	g this matter, please call:			100	≩ 89	0
		at ()			بب 	
Name o	f Contact Person	Area Code Day	time Telephone Numbe	r 🔀	တ	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle cc, FL 32301			
Enclosed is a check for the follow ☐ \$125.00 Filing Fee	ing amount: [] \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee of Status & Certified		ie	

TO:

Registration Section

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

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

1. Ardent Support Techno (Name of For	ologies, LLC eign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "	uc.
(If name unavailable, enter a	alternate name adopted for the purpose of transacting business in Florida. The alternate name," or "LLC.")	e must include "Limited
2. New Hampshire	3 01-0898864	
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable)	
4.	01/01/2015	
71	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 12 Crosby Road, Dove		
	(Street Address of Principal Office)	₹ ×
6. Same		ECG.
		普通 高 工
	(Mailing Address)	SS T
7 Name and street addres	ss of Florida registered agent: (P.O. Box NOT acceptable)	Ho - m
Name:	C T Corporation System	S≥ ∞
Office Address:	1200 South Pine Island Road	5.E 6
	Plantation , Florida 33324	
Registered agent's accep	(City) (Xip code)	
Having been named as re designated in this applica to complywith the provisi	registered agent and to accept service of process for the above stated limited liabilition, I hereby accept the appointment as registered agent and agree to act in this ions of all statutes relative to the proper and complete performance of my duties, my position as registered agent. By: CT Corporation System (Registered agent's signature) Stefania Rocco Vice President	capacity. I further agree and I am familiar with at D
	(Registered agent's signature)	
8. The name, title or capa	acity and address of the person(s) who has/have authority to manage is/are:	
David Daniels , 12 Crosb	y Road, Dover, NH 03820 Member	
James Stevens , 12 Crosb	y Road, Dover, NH 03820 Member	
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 days old, duly authenticated by the official having or of which it is organized. (If the certificate is in a foreign language, a translation of a abmitted) Signature of an authorized person	ustody of records in the the certificate under oath
This document is executed submitted in a document to	d in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any to the Department of State constitutes a third degree felony as provided for in s.817.1	false information (55, F.S.
	Typed or printed name of signee	

State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Ardent Support Technologies, LLC is a New Hampshire limited liability company formed on May 22, 2007. I further certify that it is in good standing as far as this office is concerned, having filed the annual report(s) and paid the fees required by law; and that a certificate of cancellation has not been filed.

SECRETARY OF STATE



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 29th day of July, A.D. 2016

William M. Gardner Secretary of State