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## **RFP Atlas Sales LLC**

() Nonprofit	_	
() Foreign	() Amendment	() Merger
() Limited Partnership	() Dissolution/Withdrawal	( ) Mark
(X) LLC	() Reinstatement	
Qualification	() Annual Report	() Other
	() Name Registration	
() Certified Copy	() Fictitious Name	() UCC
	_	() CUS
(x) Walk In	() Photocopies	
() Mail Out		( ) After 4:30
	() Call If Problem	(x) Pick Up
Name	() Will Wait	
Availability		
Document	9/20/2016	Order#:
Examiner		10169370
Updater	KM	
Verifier		Ref#:
W.P. Verifier		
		Amount: \$

## 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

DED ALL CLUTTE	THE STATE OF TESTADA			
1. RFP Atlas Sales LLC	eign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or			
(Name of Fore	eign Limited Liability Company; must include "Limited Liability Company." L.L.C., or	LLC. )		
(If name unavailable, enter al Liability Company," "L.L.C,	Ilternate name adopted for the purpose of transacting business in Florida. The alternate nam," or "LLC.")	ne must incl	ude "L	imited
2. Delaware	<sub>3</sub> 98-0526415			
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable)			_
4	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	-		
5. 111 Duke Stree		_		
Montreal, Quebec, H3C 2M1, Canada (Street Address of Principal Office)				
6 111 Duke Stre	cet, Suite 5000	- KA	Ü	E M COME
Montreal, Qu	uebec, H3C 2M1, Canada (Mailing Address)	RY OF S	79 A	
7. Name and street address	ess of Florida registered agent: (P.O. Box NOT acceptable)	STA ATS	ىپ	D
Name:	C T Corporation System	DE !	27	
Office Address:	1200 South Pine Island Road		-	
	Plantation , Florida 33324	_		
	(City) (Zip code)			
designated in this applica to complywith the provisi	egistered agent and to accept service of process for the above stated limited liabitation, I hereby accept the appointment as registered agent and agree to act in the ions of all statutes relative to the proper and complete performance of my duties my position as registered agent.  The Corporation Trust Compan	is capacity	o, I fui n famii zak	rther agree
8. The name, title or cap	pacity and address of the person(s) who has/have authority to manage is/are:			
•	C. Sole Member, 3301 NW 107th Street, Miami, Florida, 33167			
9. Attached is a certificate	e of existence, no more than 90 days old, duly authenticated by the official having of which it is organized. (If the certificate is in a foreign language, a translation o	custody o	f record	ds in the nder oath
This document is executed submitted in a document to	ed 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	y false info	ormatic	n
sammed in a document in	Jacques P. Vachon	,		

Typed or printed name of signee

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "RFP ATLAS SALES 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 NINETEENTH DAY OF SEPTEMBER, A.D. 2016.

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

5995668 8300 SR# 20165848333

Date: 09-19-16

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

Authentication: 203019341