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CRETARY OF STATE

O SIMMONS MAR 2 2 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

REFERENCE: 563431 4324715

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE: March 21, 2017

ORDER TIME : 1:09 PM

ORDER NO. : 563431-005

CUSTOMER NO: 4324715

FOREIGN FILINGS

NAME: TDC BLACKBIRD SCC, 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: Melissa Zender -- EXT# 62956

EXAMINER:

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:

, TDC Blackbird SCC, L	.LC		
(Name of Fore	rign Limited Liability Company; must include "Limite	d Liability Company," "L.C.C.," or "U.C.")	
(If name unavailable, enter al	ternate name adopted for the purpose of transacting by	usiness in Florida. The alternate name must include "Limited	i
Liability Company," "L.L.C.	"or"LLC.")		
2. Delaware	3.	(FEI number, if applicable)	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEt number, if applicable)	
4	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to dete	rior to registration.)	
5310 South Alston Av			
Durham, North Carolin	na 27713		
	(Street Address of Principal Office)		
6. same))
	300 11	•	Thinks Thinks Thinks
	(Muiling Address)		ເກ
7. Name and street addres	ss of Florida registered agent: (P.O. Box <u>NOT</u> a	eceptable)	. 22
Name:	Corporation Service Company		•
Office Address:	1201 Hays Street		
	Tallahassee	. Floridu 32301 (Zip code)	
D-wist	(City)	(Zip code)	
Registered agent's acception that the Registered agent and the Register an		for the above stated limited liability company at the pl	lace
designated in this applica	tion, I hereby accept the appointment as registe	red agent and agree to act in this capacity. I further	agree
to complywith the provish accept the obligations of a	ons of all statutes relative to the proper and con my position as registered agent.	uplete performance of my duties, and I am familiar w Melissa Zender	uu an
	my position as registered agent. Corporation Service Company		
	(Registered agent's signo	Asst. Vice President	
	(Registered agents signi	nurc)	
8. The name, title or capa	acity and address of the person(s) who has/have a	uthority to manage is/are:	
Anthony H. Dilweg, Man	ager, 5310 South Alston Avenue, Suite 210, Dur	ham, North Carolina 27713	
			
		henticated by the official having custody of records in a foreign language, a translation of the certificate under of	
of the translator must be si		foreign language, a translation of the certificate under	Dam
at the Henrich House the St) (
	- Contract	S. Mr.	
	Signature ht in authorized	periam	
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b), Flo the Department of State constitutes a third degree	orida Statutes. I am aware that any false information are felony as provided for in \$.817.155, F.S.	
	Jeffrey A. Benson		
	Typed or printed name of si	pnec	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TDC BLACKBIRD SCC, 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 TWENTY-FIRST DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TDC BLACKBIRD SCC, LLC" WAS FORMED ON THE FOURTEENTH DAY OF MARCH, A.D. 2017.

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

AND SECOND SECON

Authentication: 202233324

Date: 03-21-17