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(Re	questor's Name)				
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer.				
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2017 APR 27 AU 11: 01

D. SCOTT APR 2 8 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 616223 4324715

AUTHORIZATION : Some Service

COST LIMIT : \$(125.00

ORDER DATE: April 26, 2017

ORDER TIME : 9:28 AM

ORDER NO. : 616223-015

CUSTOMER NO: 4324715

FOREIGN FILINGS

NAME: TDC ORION, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

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, PLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS INTHE STATE OF PLORIDA:

, TDC Orion, LLC					
(Name of Fore	rign Limited Liability Company: must	include "Limited Liah	oility Company." "L.	L.C.," or "LLC.")	
If name unavailable, enter all iability Company," "L.L.C.	iternate name adopted for the purpose "or "LLC.")	of transacting business	s in Florida. The alte	mate name must in	clude "Limited
Delaware		3			
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if a	oplicable)	
i,	(Date first transacted busines	s in Florida, if prior to	registration.)		
5310 South Alston Av	(See sections 605,0904 & 605.0	1905, F.S. to determine	e penalty liability)		
Durham, North Carolin	na 27713				
	(Street Address of P	rincipal Office)			
i. Same					
	(Mailing A	ddress)	······································		
7. Name and street addres	ss of Florida registered agent: (P.C), Box <u>NOT</u> accepts	able)		
Name:	Corporation Service Company		_		
Office Address:	1201 Hays Street		•		
	Tallahassee		Florida 32301	code)	
lesignated in this applica o complywith the provisi	gistered agent and to accept servi- tion, I hereby accept the appoints ons of ult statutes relative to the p my position as registered agent. Corporation Service Company	nent as registered ap proper and complete	ge <mark>nt</mark> and agree to t	nct in this capacia ny duties, and 1 a Melissa Z	ty. I further agree m familiar with and Lender
	By:	red agent's signature)		Asst. Vice I	Testucin B
8. The name, title or cars	(Registe acity and address of the person(s)	<i>-</i>	ity to manage is/an	e:	27 7
·	ent, 5310 South Alston Avenue, S		-		
verney A. Delison, Cresio	cii, 3310 30ddi Alatoli Ivende, c	and 210, Barrain,			7: 53
		rtificate is in a foreig	gn language, a trans		
	***	of an authorized person	_		
	f in accordance with section 605.03 the Department of State constitut				
	Jeffrey A. Benson				

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TDC ORION, 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-SIXTH DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TDC ORION, LLC" WAS FORMED ON THE NINETEENTH DAY OF APRIL, A.D. 2017.

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





6385420 8300 SR# 20172836567 Authentication: 202440990

Date: 04-26-17