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(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
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Office Use Only



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FILED 17 APR 26 PH 12: 37 55 ONS THE SEPTEMBER



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 23, 2017

JIM BRITTON 1049 TRIAD COURT MARIETTA, GA 30062

SUBJECT: ATS PROJECT SERVICES, LLC

Ref. Number: W17000024957

We have received your document for ATS PROJECT SERVICES, LLC and your check(s) totaling \$175.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 817A00005591

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	Project Services, LLC		
50.001	Name of Limited Liability Company		
	enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Flor tence, and check are submitted to register the above referenced foreign limited liability company to transact		
Please	se return all correspondence concerning this matter to the following:		
	Jim Britton		
	Name of Person		
	Project Services, LLC		
Firm/Company			
	1049 Triad Court	SEOG T	
Address			
	Marietta, GA 30062	FILED AR 26 PM 12: 37 AFF PRESTREES	
	City/State and Zip Code	三三三	
	jbritton@atslab.com	31 31	
	E-mail address: (to be used for future annual report notification)		
For fu	further information concerning this matter, please call:		
	Scott Warren 770 423-1400 at ()		
	Name of Contact Person Area Code Daytime Telephone Num	per	
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclos	losed is a check for the following amount: \$\Boxed{\text{\text{\$\sigma}\$ \$125.00 Filing Fee} } \Boxed{\text{\$\sigma}\$ \$\$130.00 Filing Fee & \$\Boxed{\text{\$\sigma}\$ \$\$\$\$\$\$\$\$ Certificate of Status & Certified Copy \$\$\$\$\$ of Status & Certified Copy		

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: Project Services, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") ATS Project Services, 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 (FEI number, if applicable) company is organized) 03/13/17 (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1049 Triad Court Marietta, GA 30062 (Street Address of Principal Office) 1049 Triad Court Marietta, GA 30062 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Florida 32301 Tallahassee (City) 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 complywith 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 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) 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.817.155, F.S.

Typed or printed name of signee

Control Number: 17017123

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

Project Services, LLC

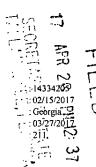
a Domestic Limited Liability Company

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
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number





Brian P. Kemp Secretary of State