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08/17/17--01022--028 **125.00





TO: **Registration Section Division of Corporations**

HHS Technology Group, LLC

ame of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Majk Kamami Name of Person Curtis, Mallet-Prevost, Colt & Mosle LLP Firm/Company 101 Park Avenue, Suite 3500 Address New York, New York 10178 Citv/State and Zip Code mkamami@curtis.com E-mail address: (to be used for future annual report notification) at (<u>212</u>) <u>696-6972</u> <u>Area Code</u>) <u>Daytime Telephone Number</u> Name of Contact Person STREET ADDRESS: MAILING ADDRESS: Division of Corporations Division of Corporations **Registration Section Registration Section** Clifton Building P.O. Box 6327

Tailahassee, FL 32314

S125.00 Filing Fee

Enclosed is a check for the following amount:

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

2661 Executive Center Circle

Tallahassee, FL 32301

For further information concerning this matter, please call:

Majk Kamami

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:

i HHS Technology Group, LLC

(if name unavailable, enter alternate n	ame adopted for the purpose of transacting business in F	Ronda The a	shemate name initsi include "Lunited Lii	ability Company," "L L C," or "LLC ")	
Delaware		3.			
(Jurisdiction under the law of which foreign limited liability company is organized)		_	5(FEI number, if applicable)		
4					
	(Date first transacted business in Florida, if prior i (See sections 505 0904 & 605 0905, F.S. to deter	to registratio	n) hability}		
< 230 Park Avenue, S	Suite 1525	(230 Park Avenue, Suite	e 1525	
5. 230 Park Avenue, Suite 1525 (Street Address of Principal Office)		0.	(Mailing Add	drc\$s)	
New York, New York 10169			New York, New York 1		
NEW TOR, NEW TOP					
				AUG	
Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Bo	<u> 100 x</u> xi	acceptable)		
	Corporation Service Company				
Name:					
Office Address: 1201 Hays Street					
Office Address [.]		<u> </u>			
	Tallahassee		, Florida <u>32301</u>	<u>ីំំំ</u> ភ្ល	
	(Cay)		(Zip co		
Registered agent's accep	tance:				
Having been named as re	gistered agent and to accept service of	(process	for the above stated limited	d liability company at the place	
devianated in this applica	tion, I hereby accept the appointment	as regis	ered agent and agree to ac	t in this cupacity. I further agr	
to comply with the provis	ions of all statutes relative to the prop	er and co	omplete performance of my	duties, and I um familiar with	
	s of my position as registered agent.				
and accept the omigation	$1 \int 0 \int \int d d d d d d d d d d d d d d d d$	Δ	Holly Jones Assistant Vice Pre	S	
	H RULLAND	.J	Assistant vice Pre	esident	
	IRegistered agent	('s signature)			
8. The name, title or cap:	acity and address of the person(s) who	has/have	authority to manage is/are:		
Title or Capacity:	Name and Address:	Ī	itle or Capacity:	Name and Address:	
President	Douglas Monticciolo				
	230 Park Avenuel Suite 1525				
	New York New York 10169				
Vice President	Mark Callaban				
Vice President	Mark Callahan		_		

(Use attachments if necessary)

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)

maller.

New York, New York 10169

Signature of an authorized person-

10. 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.



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HHS TECHNOLOGY GROUP, 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 EIGHTH DAY OF AUGUST, A.D. 2017.



leffrey W. Bullock, Secretary of Siste

Authentication: 203023952 Date: 08-08-17

6436234 8300

SR# 20175620643 You may verify this certificate online at corp.delaware.gov/authver.shtml