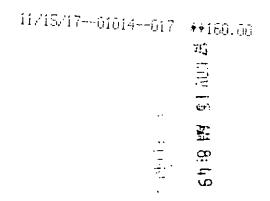
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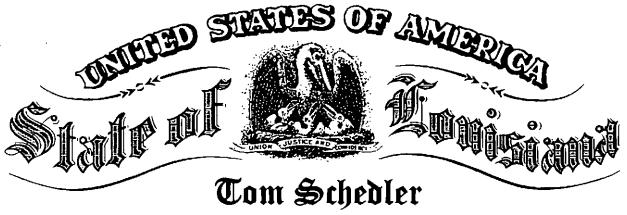
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## COVER LETTER

	ration Section on of Corporation	5			
SUBJECT:	reac	on Soft was	e LLC		
		Name of L	imited Liability Co	ompany	
The enclosed " Existence, and	Application by For- check are submitted	eign Limited Liability Compa d to register the above referen	any for Authorizati aced foreign limite	on to Tran d liability (	sact Business in Florida," Certificate of company to transact business in Florida
Please return a	l correspondence c	concerning this matter to the f	ollowing:		
		odd Althou	me of Person		
		eccon Sutw			
		Fir	m/Company		
	il	JUAN Brecks	Address	Ste '	F
		City/St.  City/St.  City/St.  E-mail address: (to be used			
For further info		g this matter, please call:		•	,
	Tudd A	\   \   \   \   \   \   \   \   \   \	at ( 440 Area Code	Dayt	3-7901 ime Telephone Number
Divis Regis P.O.	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314			Division of Registration Clifton But 2661 Execution	ADDRESS: of Corporations on Section silding cutive Center Circle ce, FL 32301
	check for the follow 25.00 Filing Fee	ving amount:  \$\sum \text{S130.00 Filing Fee & Certificate of Status}\$	□ \$155.00 Filin Certified Copy	g Fee &	S 160.00 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTIC COMPANY TO TRANSACT BUSTI	ON 605.0902, FLORIDA STATUTES, THI NESS INTHE STATE OF FLORIDA;	E FOLLOWING IS SU	IBMITTED TO REGISTE	R A FOREIGN LIMITED	LLABILJTY
1. Beacon	Software LI	muted Liability Company	y," "L.L.C.," or "LLC,")		
_		y compa	y. Lib C., or LEC, y		
(If name unavailable, enter alternate rame	adopted for the purpose of transacting business in	n Florida. The alternate nan	e must include "Lamited Liabi	hty Company," "L.L.C," or "LLC	·, ••)
2. (Jurisdiction under the law of which	foreign limited liability company is organized)	3	72-149 26 (FEI numbe	r, if applicable)	
4. Jane	Date first telessacted business in Florida, if pro- (See sections 605 0904 & 605 0905, F.S. to det	or to registration.)	····		
- 435 11 (1)	, A	termine penalty liability)	S-0. 3	.11. 01	
(Street Address of Princ	application and the	6{{C}}	(Mailing Addre	Ville Rel	
New Crican	5, LA 70112		Ste F		
	·		Brecksville	CH 44141	
7 Name and street address of	of Florida registered current (D.O. T	Day NOT accept	T - 1		
7. Name and street address of	of Florida registered agent: (P.O. E	sox <u>NO1</u> acceptan	ic)		
Name:	HL Statutory Agent, Inc 5811 Pelican Bay boulevard	1 Suite 650			
Office Address: _		1, Sake 050			
	Naples		Florida 34108		
Registered agent's acceptar	(City)	,	(Zrp ende)		75
to comply with the provision.	n, I hereby accept the appointments of all statutes relative to the profession as registered agent.  (Reputed to	per and complete f	performance of my di	uties, and I am familia	with:
8. The name, title or capacit	y and address of the person(s) who	has/have authorin	to manage islare:		-
Title or Capacity:	Name and Address:	Title or C		Name and Address:	w
一面 Presiden	TEND A HYDRISC ICORI PRECESSIIVE BRECESSIIVE ON 44				
	TARCESTIF OF TH	1191			
CEO	Rudy Snith	Ale ——	<del></del>		
	New Unleans, LA	<u>7</u> 412			
(Use attachments if necessary	y)				
<ol> <li>Attached is a certificate of jurisdiction under the law of to of the translator must be subn</li> </ol>	existence, no more than 90 days of which it is organized. (If the certifinitted)	ld, duly authenticat cate is in a foreign	ed by the official hav language, a translatio	ing custody of records in of the certificate unde	n the er oath
10. This document is execute submitted in a document to th	d in accordance with section 605.0 e Department of State constitutes a	203 (1) (b), Florids third degree felon	Statutes. I am aware y as provided for in s.	that any false information	on
	Sold from Lord				
_	Signa	iture of an authorized perso	n	<del></del>	
	Tode Althour	is Duesin	Lewi		
	Турс	ed or printed name of signer	· ———		



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

## **BEACON SOFTWARE, L.L.C.**

A limited liability company domiciled in NEW ORLEANS, LOUISIANA,

Filed charter and qualified to do business in this State on December 14, 2000,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

November 14, 2017

Certificate ID: 10888352#BRK73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Secretary of State
Web 35015336K