## M/800000/221

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
, ,,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
······································
Special Instructions to Filing Officer:





900308770309

02/06/18--01003--004 \*\*125.00

TARTE THE FEB -5 AM 7-1

## SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 2/5/2018	##TT7	
		ULK IN**
ENTITY NAME PATH D	ECISION SUPPORT SOFTWARE, LLC	
<del></del>		
DOCUMENT NUMBER		
	**PLEASE FILE THE ATTACHED AND RETURN**	
XXXXX	Plain Copy	
	Certified Copy	
	Certificate of Status	
**P2	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**  Certified Copy of Arts & Amendments  Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINATI		
NUMBER OF CERTIFICAT	ES REQUESTED	
TOTAL OWED 125.00	СНЕСК # <u>4510</u>	
Please call Tina at the	e above number for any issues or concerns. Thank you so much!	/

## COVER LETTER

то:		ration Section in of Corporation	ıs			
SHRIF	P/	ATH Decision Sur	pport Software, LLC			
34713017	C1			Limited Liability (	Company	
The enc Existence	losed "A	application by For heck are submitte	eign Limited Liability Comp d to register the above refer	pany for Authoriza enced foreign limi	ition to Tra ted liability	insact Business in Florida," Certificate of y company to transact business in Florida.
Please r	cturn all	correspondence c	concerning this matter to the	following:		
		Ann K. Rich				
			N	ame of Person	•	
		Waller Lansder	n Dortch & Davis LLP			
			Fi	rm/Company		<del></del>
		511 Union Stre	et, Suite 2700			
				Address		
		Nashville, TN	37219			
			City/S	tate and Zip Code		
		ann.rich@waller				
			E-mail address: (to be used	I for future annual	report not	ification)
For furt	her infor	mation concernin	g this matter, please call:			
	Ann K	. Rich		615 at (	850-87	45
		Name o	f Contact Person	Area Code	Day	time Telephone Number
	Divisio Registr P.O. Bo	ING ADDRESS: on of Corporations ation Section ox 6327 assec, FL 32314			Division Registrate Clifton B 2661 Exc	CADDRESS: of Corporations ion Section uilding centive Center Circle see, FL 32301
Enclose		eck for the follow 5.00 Filing Fee	ing amount:  \$\sum \text{S130.00 Filing Fee & Certificate of Status}\$	S155.00 Filir Certified Copy	ng Fee &	S160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLANCE 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:

PATH Decision Supporting (Name of Forest	rign Limited Liability Company; mu	st includ	le "Limited Liabi	lity Company," "L.L.C.," or	"LLC.")	
		<del></del>		· •• · · · · · · · · · · · · · · · · ·		
I name unavailable, enter all iability Company," "L.L.C,"	ternate name adopted for the purpos " or "LLC.")	e of tran	sacting business	in Florida. The alternate nam	ie must include "Limit	eu
Delaware		3.	81-5469925			
(Jurisdiction under the law company is organized)	of which foreign limited liability			(FEI number, if applicable)		
					_	
	(Date first transacted busin (See sections 605.0904 & 605	ess in Flo .0905, F	orida, if prior to ( .S. to determine	registration.) penalty liability)		
1423 Bartow Drive, St		_ <del>_</del>			-	
Celebration, FL 3474	7				<b></b>	
	(Street Address of	Principa	[Office)	- ,	18 181	
(same as above)					. 是 冊	۽ جسم
					$\sigma$	
	(Mailing	Address	)	<del> </del>	. : o	
Names and season address	_			klV	三二、 秦	$\bigcirc$
	ss of Florida registered agent: (P Leonard J. Testa	.Q. Bux	. <u>NO 1</u> accepta	ole)	7: 2 1:11 1:310	
Name:	1423 Bartow Drive, Suite 203				÷	
Office Address:	Celebration (City)			11747		
	Celebration			, Florida 34747	_	
esignated in this applica complywith the provisi	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the	vice of j tment a proper	process for the is registered ag	above stated limited liabi ent and agree to act in thi	s capacity. I furthe	r agr
	ny position as registered agant.	K -	-			
	By: Clari		ent's signature)		-	
	· (Ceys	tered age	mt s signature)			
. The name, title or capa	acity and address of the person(s	) who h	as/have authori	ty to manage is/are:		
eonard J. Testa, Membe	r, 1423 Bartow Drive, Suite 203.	. Celebr	ation, FL 3474	<del>.</del> 7		
Bradley S. Eilerman, Mer	nber, 10709 Lucy Court, Union.	KY 41	091			
	······································			<del>.</del>	<del></del>	
	of existence, no more than 90 do of which it is organized. (If the cabmitted)					
	Signatuk	an ai	ithorized person			
	I in accordance with section 605.  the Department of State constitu					
	Leonard J. Testa, Member			•		

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "PATH DECISION SUPPORT SOFTWARE, 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 FIFTH DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PATH DECISION SUPPORT SOFTWARE, LLC" WAS FORMED ON THE EIGHTH DAY OF FEBRUARY, A.D. 2017.

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

Authentication: 202093064

Date: 02-05-18