3239628300 From: Meghan Smith

4/3/2018

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180001050713)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Eax Number

: (852)617-6383

From:

: LEGALZOOM.COM INC. Account Name

Account Number : 120010000062

Phone

: (323)962-8600

Fax Number

: (323)962-3889

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Foreign Limited Liability Company ATIV SOLUTIONS LLC

Certificate of Status	Û
Certified Copy	i.
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

B FIGUEROA APR 04 2018

COVER LETTFR

	Registration Section Division of Corporations				
CUD IF	ATIV SOLUTIONS LLC		••		
SUBJEC	<u></u>	Name of Limited	Liability Company	- <u> </u>	
The encl Existenc	osed "Application by Foreign Limit e, and check are submitted to regist	ted Liability Compa er the above referen	my for Authorizati need foreign limite	ion to Tr ed liability	ansact Business in Florida," Certificat y company to transact business in Flor
Please re	turn all correspondence concerning	this matter to the f	ollowing:		
		Cheye	nne Moseley		
		Nar	ne of Person	·· 	
		Legalzo	om.com, Inc.	1	
		Fin	n/Company	Ţ	
		101 N Brar	nd Blvd 11th F	loor	
	· · · · · · · · · · · · · · · · · · ·		Address		
		Glenda	le, CA 91⊠03		
		City/Sta	te and Zip Code		
		_	ativsoftware.c		
	E-mail	Inddress: (to be used	for future annual re	port notifi	cation)
For furth	her information concerning this mat	ter, please call:			
	Cheyenne Moseley		800 at (773 <mark>-</mark> (0888 ext9724
	Name of Contact	Person	Area Code	D	aytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton I 2661 Ex	<u>r ADDRESS:</u> of Corporations tion Section Building eeutive Center Cir see, Fl. 32301	rele	
Enclos		ig amount:),00 Filing Fee & ificate of Status	S155.00 Filin Certified Cop .20		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

. ATIV SOLUTIONS LL	DINESS INTHE STATE OF FLORIDA: C					
(Name of Forci	gn Limited Liability Company; must include	"Limited Liability Compa-	ny, ""L.L.C.," or "LLC")			
(If name unavailable, enter al:	emate name adopted for the purpose of trans-	ecting business in Florida.	The alternate name must include "Limi	ited		
Liability Company," "L.L.C."		6 E027747				
₂ , CA	3 .	0-5836677	ber, if applicable)			
(Jurisdiction under the law of company is organized)	of which foreign limited liability	(remun	ger, ir appricaous)			
4	(Dute first translicted business in Flor	ida if order to registration.	5			
	(See sections 605.0904 & 605.0905, F.)	s, to determine penalty liah	ility)			
5. 340 S. Lemon Ave. #46	505					
Walnut, CA 91789			· · · · · · · · · · · · · · · · · · · 			
	(Street Address of Principal	Ottice)				
6. 340 S. Lemon Ave. #46	<u> </u>		<u> </u>			
Walnut, CA 91789						
	(Mailing Address)		ļ i			
7. Name and street addies	s of Plorida registered agent: (P.O. Box		1			
Name:	United States Corporation Agents, Inc.	 :				
Office Address:	13302 Winding Oak Court Suite A					
71	Tampa	. Florida	33612			
	(City)		(Zip code)			
Registered agent's accep	tance: gistered agent and to accept service of p	incress for the above sta	ated Umited liability company at the	o place		
and the state of t	riou. I hereby account the appealmental at	i revisiered aveni und u	руес та аст т таз сарисну. Тунгиј	TEL WAY ME		
to complywith the provision	ons of all statutes relative to the proper :	and complete performa. Cheyenne Moseley, Assi	ися ој ту ависэ, апа 1 ви јатин	Sin di		
accept the obligations of i	my position as registered agent.	behalf of United States C	Corporation Agente, Inc.	PR 94		
	(Registered age	nt's signature)	·	الم الم		
Y. The same title or can	acity and address of the person(s) who ha	s/have authority to man	age is/are:	3 AH 7:		
	ner, 24 S Bank St., Apt. 313, Philadelphia			38		
	340 S Lemon Ave., Ste. 4606, Walnut, C					
	340 S Lemon Ave., Ste. 4606, Walnut, C			,		
			a affaird having everydy of records	In the		
 Attached is a certificate invisdiction under the law 	of existence, no more than 90 days old, of which it is organized. (If the certificat	e is in a foreign languag	c, a translation of the certificate und	der oath		
of the translator must be s	nimitel)	- Carrier	1			
	Siller	E.	<u></u>			
	Signature of an au	ultorized person				
This document is executed	d in accordance with section 605.0203 (1 o the Department of State constitutes • th) (b), Florida Statutes, I : ird degree Glony as nro	nm aware that any false information vided for in s.817.155, F.S.	ı		
ACCURACE IN A CHEMICAL I	Silke Fleischer		•			

Typed or printed name of signee

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: ATIV SOLUTIONS LLC

FILE NUMBER:

200630610040

FORMATION DATE:

09/26/2006

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 27, 2018.

ALEX PADILLA Secretary of State