118000003441

(Requestor's Name)				
(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:				

Office Use Only



300311814533

SECRETARY OF LITHIE

APR 10 AM 8:5

18 呼R 10 AH 10:37

O SIMM APR 1 1 2 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 152247 7950090

AUTHORIZATION :

COST LIMIT : \$ 125.00 hold

ORDER DATE : April 9, 2018

ORDER TIME : 9:21 AM

ORDER NO. : 152247-005

CUSTOMER NO: 7950090

FOREIGN FILINGS

NAME: ATOS PUBLIC SAFETY, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

	Registration Section Division of Corporations						
SUBJEC	ATOS Public Safety, L	rc					
DODODO	·•·	Name of Limited Liability Company					
The enck Existence	osed "Application by Foreig e, and check are submitted to	n Limited Liability Comp o register the above refere	any for Authorization aced foreign limited	on to Transact Business in Hiability company to trans	Fib: ida," Certificate o sart husiness in Florida		
Please re	turn all correspondence con	cerning this matter to the	following:				
	Amy Chipperso	n					
	 	Na	ame of Person				
	Atos IT Solutions	and Services Inc.					
		Fi	rm/Company				
	2500 Westchester Avenue Suite 300						
	Address						
	Purchase, NY 10577						
	City/State and Zip Code						
	amy.chipperson@a	los.net					
	1	-mail address: (to be used	for future annual re	port notification)			
For furth	er information concerning t	his matter, please call:					
			at () Area Code				
	Name of C	Contact Person	Area Code	Daytime Telephone N	lumber		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		<u>S</u> E R C 2 T	cle			
	•	g amount: 3 \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	Fee & 🗀 \$160.00 Fili of Status & Cer	ng Fee, Certificate tified Copy		

DocuSign Envelope ID: 08726BDE-D1DF-4E44-9EDD-DDA664D5B22C

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

1 ATOS Public Safety, I	LC		
(Name of Foreign	Limited Liability Company; must include	"Limited Liability Company," "L. L. C.," or "L	TC',
(If name mavailable, enter alternate n	name adopted for the purpose of transacting busine	ss in Florida. The alternate name must include "Limit	ted Liability Company," "L.L.C," or "LLC.")
2. Delaware		3. 814281148 -	
(Jurisdiction under the law of w	nich foreign limited hability company is organized) (FE	:I number, if applicable)
4.			
	(Date first transacted business in Florida, if (See sections 605 0904 & 605 0905, F.S. to	prior to registration) determine penalty liability)	
5. 2500 Westchester Ave	nue Suite 300	6.	
(Street Address of I	rincipal Office)	(Mailin	ng Address)
Purchase, NY 10577			
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7. Name and street address	ss of Florida registered agent: (P.C). Box <u>NOT</u> acceptable)	一
Name:	Corporation Service Company		日 日野 三 ロ
IVAIIIC.			55 0
Office Address:	1201 Hays Street		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	Tallahassee	, Florida 32301	
	(City)	, 1 107,00	Zip code)
and accept the obligation.	s of my position as registered agen Corporation Service Company By: (Registered		Roxanne Turner Asst. Vice Presider
8. The name, title or capa <u>Title or Capacity:</u>	ncity and address of the person(s) v Name and Address:	who has/have authority to manage is/a Title or Capacity:	are: Name and Address:
MANAGER_	Hans-Georg Reich	1	
	2500 Westchester Ave S Purchase, NY 10577	<u>Ste 300</u>	
			
(Use attachments if neces	sary)		
	of which it is organized. (If the cer	s old, duly authenticated by the offici tificate is in a foreign language, a tra	
		5.0203 (1) (b), Florida Statutes, I am	
		Haus-Georg Reidel	
	8	ihyatin dağlarki oğlasiyasi berson	
		Hans-Georg Reichl	
		Typed or printed name of signee	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ATOS PUBLIC SAFETY, 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 NINTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATOS PUBLIC SAFETY, LLC" WAS FORMED ON THE NINTH DAY OF SEPTEMBER, A.D. 2016.

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

Authentication: 202475204

Date: 04-09-18

6146215 8300 SR# 20182526345

COVER LETTER

то:	Registration Section Division of Corporations						
SUBJE	ATOS Public Safety, LL	С					
5010012							
The end Existen	losed "Application by Foreign ce, and check are submitted to	Limited Liability Compregister the above refere	any for Authorizati nced foreign limite	ion to Trai d liability	nsact Business in F company to transa	lbrida," Certificate of ct business in Florida	
Please r	eturn all correspondence conce	rning this matter to the	following:				
	Amy Chipperson					_	
		Na	ame of Person				
	Atos IT Solutions at	nd Services Inc.					
		Fi	rm/Company				
	2500 Westchester A	venue Suite 300					
			Address			· 	
	Purchase, NY 10577						
		City/S	tate and Zip Code				
	amy.chipperson@ato	s.net					
	E-1	mail address: (to be used	for future annual	report not	fication)		
For fur	her information concerning thi	s matter, please call:					
			at (.)			
	Name of Co	ntact Person	Area Code	Day	time Telephone N	ımber	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			le		
Enclose		amount: \$130.00 Filing Fee & ertificate of Status	☐ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing of Status & Certi		