## 118000003589

(Re	questor's Name)					
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
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SECRETARY OF STATE
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April 9, 2018

DOUGLAS RICK 30000 MILL CREEK AVE, STE 100 ALPHARETTA, GA

SUBJECT: LANDIS+GYR LLC Ref. Number: W18000033445

We have received your document for LANDIS+GYR LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 318A00007131

Octavia L Simmons Regulatory Specialist III

## COVER LETTER

	stration Section sion of Corporation	ons				
orth tezer.	Landis+Gyr LLC					
SUBJECT:	·		Limited Liability	Company		
					ansact Business in Florida," Certificate o y company to transact business in Florid	
Please return a	all correspondence	concerning this matter to the	following:			
	Douglas Rick					
		N	ame of Person		· · · · · · · · · · · · · · · · · · ·	
	Landis+Gyr L	LC				
	<del></del>	F	irn/Company		<del></del>	
	30000 Mill Creek Avenue, Suite 100					
			Address		<del></del>	
	Alpharetta, G	A 30022				
		City/S	State and Zip Code	:		
	doug.rick@land	disgyr.com				
		E-mail address: (to be use	d for future annua	l report no	tification)	
For further inf	formation concerni	ng this matter, please call:				
Douglas Rick		678 at (	258-12	295		
	Name	of Contact Person	Area Code		ytime Telephone Number	
Divis Regis P.O.	LING ADDRESS sion of Corporation stration Section Box 6327 shassee, FL 32314	_		Division Registra Clifton I 2661 Ex	r ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301	
	check for the follo 25.00 Filing Fee	wing amount:  \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fili Certified Copy		☐ \$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 SECTION 605,0902, FLORIDA STATUIES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Landis+Gyr LLC (Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LL	C.")		
If name unavailable, enter alternate na	ame adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limited	d Liability Company." "L.L.C," or "L.I.C ")		
Delaware		3 03-0400907			
(Jurisdiction under the law of wh	ich foreign limited liability company is organized)	(FEI	number, if applicable)		
05/01/2017 Converted	in State of Incorporation (DE); was regis	stered as C-Corp in FL (F02000	0002278)		
'·	(Date first transacted business in Florida, if prior to re (See sections 605.0904 & 605.0905, F.S. to determine	gistration.) penalty liability)	7:0 6		
30000 Mill Creek Ave		6. 30000 Mill Creek Aver	nue ES		
(Street Address of P Suite 100	rincipal Office)	Suite 100 (Mailing Address)			
Alpharetta, GA 30022		Alpharetta, GA 30022			
Name: Office Address:	Corporation Service Company  1201 Hays Street				
Office Address:	1201 Hays Street	<del></del>			
	Tallahassee	, Florida <u>32301</u>			
Registered agent's accep-	(City)	(Zij	p code)		
lesignated in this applicate comply with the provisi	gistered agent and to accept service of prion, I hereby accept the appointment as ons of all statutes relative to the proper of of my position as registered agent.  (Registered agent's signal of the proper of the	registered agent and agree to and complete performance of Holly Jones Assistant Vice Pres	act in this capacity. I further agre my duties, and I am familiar with		
	city and address of the person(s) who has		re:		
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:		
President/CEO	Prasanna Venkatesan	VP/Secretary	David Wilson		
	30000 Mill Creek Ave # 100 Alpharetta, GA 30022		30000 Mill Creek Ave # 100 Alpharetta, GA 30022		
VP/CFO	Blake Miskin	Assistant Treasurer	Douglas Rick		
	30000 Mill Creek Ave # 100 Alpharetta, GA 30022		30000 Mill Creek Ave # 100 Alpharetta, GA 30022		
(Use attachments if necess	sary)				

- 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)
- 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 felopy as provided for in s.817.155, F.S.

Douglas Rick

ASSIST Treasure

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "LANDIS+GYR 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 TWENTY-THIRD DAY OF FEBRUARY, A.D. 2018.

Authentication: 202201434

Jeffrey W. Bulloca, Secretary of State

Date: 02-23-18