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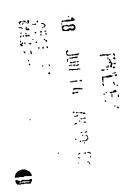
	(Requestor's Name)
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PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
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### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Rapid Deplayment Pract Management, LLC Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
Argelita Heredia Name of Person		
Rapid Deployment Project Management UC		
2102 May Dr Address		
City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Angelita Heredia at (404), 662-6004  Name of Contact Person Area Code Daytime Telephone Number		
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclosed is a check for the following amount:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc		

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

IN COMPLIANCE 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 Deployment Project Management LLC
me of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "LLC") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
These sections 605 0904 & 605 0905, F.S. to determine penalty liability.) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: 8219 Ulmerton Rd, Unitay (Use attachments if necessary) 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 felony as provided for in s.817.155, F.S. Signature of an authorized person

Typed or printed name of signee

Control Number: 15104843

# STATE OF GEORGIA

# Secretary of State

**Corporations Division** 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

1. Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### Rapid Deployment Project Management LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Docket Number : 15829899 Date Inc/Auth/Filed: 11/02/2015 Jurisdiction : Georgia Print Date : 06/13/2018 Form Number : 211



Brian P. Kemp Secretary of State