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7/5/2018

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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Electronic Filing Menu

Corporate Filing Menu

Help

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Contego Investigative Services, LLC

(Name of Foreign Lanuted Liability Company, must include "Limited Liability Company," "LLC.," or "LLC.")

Delaware		3	F12000004085		
(Jurisdiction under the law of w	ich foreign limited liability cumpany is organized)		(FEI number, if applicable)		
upon filing					
	(Date first transacted bisiness in Florida, If prior to (See sections 603 0904 & 605 0905, FS' to determ	registration ine panality	i) Indukty)	-	
	5900 North Andrews Avenue, Suite 1000		5900 North Andrews Avenue,	Suite 100	0
(Street Address of Principal Office) Fort Lauderdale, FL 33309			(Mailing Address) Fort Lauderdale, FL 33309	*	18
					E
Name and street addres	s of Florida registered agent: (P.O. Box	<u>NO1 </u>	acceptable)		، اک اک
Name:	C T Corporation System				77.
Office Address:	1200 South Pine Island Road			 	15
	Plantation		, Florida <u>33324</u>		54
	(City)		(Zip code)		

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 dutles, and I am familiar with and accept the obligations of my position as registered agent.

Ву	To Corporation System		d Younan
_	Wegifiared agent'	(ignature) Assistar	nt Secretary
8. The name, title or capacit	y and address of the person(s) who h	as/have authority to manage is/	are:
Title or Capacity:	Name and Address:	Title or Capacity;	Name and Address:
President	Jason Linn	Treasurer	Gex Richardson
	5900 N. Andrews Ave. Fort Lauderdale, FL 33309		5900 N. Andrews Ave, Fort Lauderdale, FL 33309
Secretary	Beth Crews		
	5900 N. Andrews Ave, Fort Lauderdale, FL 33309		

(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, 1 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 norwa Beth Crews

Typed or printed name of pierce



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CONTEGO INVESTIGATIVE SERVICES, 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 JULY, A.D. 2018.

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



Authentication: 203010931 Date: 07-05-18

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You may verify this certificate online at corp.delaware.gov/authver.shtml