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DATE: 7/17/18

NAME: TELGIAN ENGINEERING & CONSULTING, LLC

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:		ration Section n of Corporatio	ns				
SUBJE		lgian Engineerin	g & Consulting, LLC				
50.501			Name of	Limited Liability	Company		
The end Existen	closed "A ice, and c	pplication by Fo heck are submitte	reign Limited Liability Com ed to register the above refer	pany for Authoriz enced foreign limi	ation to Tr ted liabilit	ransact Business in Florida," Ce ty company to transact business	rtificate of in Florida
Please	return all	correspondence	concerning this matter to the	following:			
		Eboni Robinso	n .		•		
			N	ame of Person			
		Parasec					
			F	irm/Company			
		2804 Gateway	Oaks Drive #100				
				Address			
		Sacramento, C.	A 95833				
			City/S	tate and Zip Code			
		erobinson@para					
	-		E-mail address: (to be used	for future annual	report no	titication)	
For furt	her infor	nation concernin	g this matter, please call:				
	Eboni F	Robinson		800 at (533-72	72	
	-	Name o	f Contact Person	Area Code	Day	rtime Telephone Number	
	Division Registra P.O. Bo	NG ADDRESS: n of Corporations tion Section x 6327 see, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section uilding cutive Center Circle see, FL 32301	
Enclose		ck for the follow 00 Filing Fee	ing amount: 国 \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certifi of Status & Certified Copy	icate

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:

l'anne unavailable, enter alternate r	ame adopted for the purpose of transacting business in Flor	ida. The alternate rame must include "Limi	ited Liubility Company," "L.L.C." or "LLC.")
Arizona		3.	
(Jurisdiction under the law of w	hieli foreign limited linhibity company is organized)	(fi	El munher, il applicable)
· 	(Date first transacted business in Florida, if prior to n (See sections 605,0904 & 605,0905, F.S. to determin	egastration.)	
10230 S. 50th Place, S		6. Same	
(Street Address of I		(Maile	ng Address)
Phoenix, AZ 85044			
. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Paracorp Incorporated		
Office Address:	155 Office Plaza Drive, 1st Floor		
	77 11 3	Fig.:4- 32301	l .
	Tallahassee	FIORIDA	
aving been named as re- signated in this applicat comply with the provisi-	(City) tance: gistered agent and to accept service of prition, I hereby accept the appointment as one of all statutes relative to the proper a of any position as registered agent.	registered agent and agree to and complete performance of	nited liability company at the place o act in this capacity. I further agree I my duties, and I am familiar with
laving been named as re- esignated in this applical comply with the provisi- nd accept the obligations	tance: gistered agent and to accept service of prition, I hereby accept the appointment as ons of all statutes relative to the proper at of my position as registered agent. (Registered agent's significant	rocess for the above stated lin registered agent and agree to and complete performance of Marketter ASSI Soprenties	nited liability company at the place of act in this capacity. I further agree my duties, and I am familiar with
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aving been named as re- esignated in this applicate comply with the provisi- ad accept the obligations. The name, title or capa Title or Capacity: Manager Manager Use attachments if necess Attached is a certificate of	tance: gistered agent and to accept service of prition, I hereby accept the appointment as ons of all statutes relative to the proper at of my position as registered agent. CITC A LOLG LOLG LOLG (Registered agent) is in the proper of the p	rocess for the above stated lin registered agent and agree to and complete performance of (putture) Thave authority to manage is/a Title or Capacity: Manager	nited liability company at the place of act in this capacity. I further agree my duties, and I am familiar with are: Name and Address: Brian Ballard 10230 S. 50th Place, Ste 100 Phoenix, AZ 85044

Typed or printed name of signed







Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

1, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

TELGIAN ENGINEERING & CONSULTING, LLC

ACC file number: L22382964

was incorporated under the laws of the State of Arizona on 11/28/2017, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave hereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 07/17/2018

Ted Vogt, Executive Director



