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COVER LETTER

| 10: | Division of Corporation | ns | | | | | | |
|-----------|--|---|-----------------------------------|---|-------------------------------------|---|------|-----|
| SUBJE | Enpol, LLC | | | | | | | |
| | | Name of | Limited Liability | Company | | | | |
| | | eign Limited Liability Com d to register the above refer | | | | | | |
| Please re | eturn all correspondence c | concerning this matter to the | e following: | | | | | |
| | Jesika Johnsto | on | | | | | | |
| | | } | Name of Person | | | | | |
| | Enpol, LLC | | | | | | | |
| | | . <u></u> | Firm/Company | | | | | |
| | 6050 Peachtre | ee Parkway Ste. 240-211 | | | | | | |
| | | | Address | | | | | |
| | Norcross, GA | 30092 | | | | 12. 13. | 2010 | |
| | | City/S | State and Zip Code | : | | 1:2. | 38 (| |
| | jesi@enpol.com | ١ | | | | SSY | P 17 | حدي |
| | | E-mail address: (to be use | ed for future annua | l report notif | ication) | <u> </u> | 7 | m |
| For furth | ner information concerning | g this matter, please call: | | | | 88.0 10.00 1 | ထ္ | - |
| | Trish Lawler | | 770 at (| 441-503 | 3 | ģ. | 23 | |
| | Name o | f Contact Person | Area Code | Dayti | me Telephone Nu | ımber | | |
| | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 | | | Division of Registratio Clifton Bui 2661 Exect | | e | | |
| Enclosed | d is a check for the follow B \$125.00 Filing Fee | ing amount: \$130.00 Filing Fee & Certificate of Status | □ \$155.00 Fili Certified Copy | | ☐ \$160.00 Filing of Status & Certi | | | 2 |

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:

| (If none unaughble enter alternate of | ame adopted for the purpose of transacting business in Flo | ids. The alternate name must include "Limite | ed Liability Company," "L.L.C." or "LLC.") |
|--|--|--|---|
| | are adopted for the purpose of transacting passacias in this | 3. 58-2361532 | , |
| 2. Georgia (Jurisdiction under the law of w | hielt foreign limited liability company is organized) | 3, 30-230 1302 (FEI | i number, if applicable) |
| 4. 07/01/17 | | | |
| 4, 97701111 | (Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine | registration.) | |
| 5. 6050 Peachtree Parl | | 6. 6050 Peachtree Park | way |
| (Street Address of I | | (Mailing | g Address) |
| Ste. 240-211 | | Ste. 240-211 | <u> </u> |
| Norcross, GA 30092 | | Norcross, GA 30092 | |
| 7. Name and street addres | ss of Florida registered agent: (P.O. Box Capitol Corporate Services, Inc. | NOT acceptable) | THANSSED IN |
| Office Address: | 515 East Park Avenue 2nd Floor | | - |
| | Tallahassee | , Florida <u>32301</u> | 50 8. L |
| | (City) | (Z) | ip code) 🖃 🗀 🖒 |
| to comply with the provisi | ions of all statutes relative to the proper s of my position as registered agent. | and complete performance of | act in this capacity. I further agree my duties, and I am familiar with |
| to comply with the provisional accept the obligation | ions of all statutes relative to the proper s of my position as registered agent. Duani Case (Registered agent's | and complete performance of | my duties, and I am familiar with |
| to comply with the provisional accept the obligation | ions of all statutes relative to the proper s of my position as registered agent. | and complete performance of | my duties, and I am familiar with |
| to comply with the provisional accept the obligation. 8. The name, title or cape | ions of all statutes relative to the proper s of my position as registered agent. (Registered agent's acity and address of the person(s) who has | and complete performance of asst. St. Signature) 18/have authority to manage is/a Title or Capacity: CEO | my duties, and I am familiar with |
| to comply with the provisional accept the obligation. 8. The name, title or caparity: | ions of all statutes relative to the proper s of my position as registered agent. (Registered agent's acity and address of the person(s) who has Name and Address: Jesika Johnston | and complete performance of ast. M. signature) s/have authority to manage is/a Title or Capacity: CEO | re: Name and Address: Mark Herian 6050 Peachiree Pkwy Stc. 240-211 |
| to comply with the provisional accept the obligation. 8. The name, title or cape Title or Capacity: President | ions of all statutes relative to the proper s of my position as registered agent. (Registered agent's acity and address of the person(s) who has Name and Address: Jesika Johnston 6050 Peachtree Pkwy Ste. 240-2 Norcross, GA 30092 Trish Lawler 6050 Peachtree Pkwy Ste. 240-2 Norcross, GA 30092 | and complete performance of ast. M. signature) s/have authority to manage is/a Title or Capacity: CEO | re: Name and Address: Mark Herian 6050 Peachiree Pkwy Stc. 240-211 |
| to comply with the provisand accept the obligation. 8. The name, title or caparity: President Director of Finance (Use attachments if necessity: attached is a certificate jurisdiction under the law of the translator must be second.) | ions of all statutes relative to the proper s of my position as registered agent. (Registered agent's acity and address of the person(s) who has a new and Address: Jesika Johnston 6050 Peachtree Pkwy Ste. 240-2 Norcross, GA 30092 Trish Lawler 6050 Peachtree Pkwy Ste. 240-2 Norcross, GA 30092 sary) of existence, no more than 90 days old, of which it is organized. (If the certificat ubmitted) of the Department of State constitutes a the serior of the department of State constitutes a the serior of the property of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the department of State constitutes a the serior of the serior of the department of State constitutes a the serior of | and complete performance of asst. M.C. Software authority to manage is/a Title or Capacity: CEO Il duly authenticated by the official is in a foreign language, a train (b) (b), Florida Statutes, I am a | re: Name and Address: Mark Herian 6050 Peachtree Pkwy Stc. 240-211 Norcross, GA 30092 al having custody of records in the aslation of the certificate under oath |

Typed or printed name of signee

Control Number: K745468

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

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

ENPOL, 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.

> Docket Number : 16221477 Date Inc/Auth/Filed: 12/19/1997 Jurisdiction : Georgia Print Date : 09/11/2018

Form Number : 211



Brian P. Kemp Secretary of State