PSIKODOPPIM

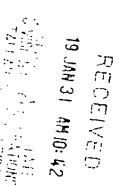
(Req	juestor's Name)	
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number	
000)	omene ramber,	,
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



700323774867





ÿ

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 608260

AUTHORIZATION

COST LIMIT : (\$\)160.00

ORDER DATE: January 30, 2019

ORDER TIME : 10:15 AM

ORDER NO. : 608260-005

CUSTOMER NO: 7665352

FOREIGN FILINGS

NAME: APCO WORLDWIDE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ____ CERTIFIED COPY

____ PLAIN STAMPED COPY

XX ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

7665352

COVER LETTER

		stion Section s of Corporation	15						
SUBJEC		PCO Worldwide l	LLC						
			Name of	Limited Liability	Company				
The enclose Existence	osed "A _l e, and ch	pplication by For teck are submitte	eign Limited Liability Comp d to register the above refere	pany for Authoriza enced foreign limi	ation to Tra ited liability	nsact Business company to tra	in Florida," ansact busin	Certificates in Fl	ate of orida.
Please re	turn all	correspondence c	oncerning this matter to the	following:					
		General Counse	el						
			N	ame of Person		<u> </u>			
		APCO Worldw	ide Ll.C						
			Fi	rm/Company					
		1299 Pennsylva	inia Ave NW, Suite 300						
				Address			=1	~2	
		Washington, De	20004				ST LS	119 JAN	n
			City/S	tate and Zip Code	-		- 	2	-
	-	LegalWorldwide	@apcoworldwide.com				3339		[F]
			E-mail address: (to be used	I for future annua	l report noti	ification)	22.7	ن ک	
For furth	er inforn	nation concerning	g this matter, please call:				925	2	
	Jonatha	n Friedman		202 at (778-130)5	3 5	لي	
		Name o	f Contact Person	Area Code	Dayı	time Telephone	Number		
	Division Registra P.O. Bo	NG ADDRESS: of Corporations tion Section x 6327 see, FL 32314			Division of Registration But Clifton But 2661 Execution	ADDRESS: of Corporations on Section pilding cutive Center C ee, FL 32301			
		ck for the followi 00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ng Fee &	■ \$160.00 Fi of Status & C			

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

IN COMPLIANCE WITH SECTION (05.0X02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alterna	name adopted for the purpose of transacting business	in Florida. The alterna	ste name must include "Limited	Liability Company," "L.L.C," or "LLC.")
2. Delaware		3. 13	3-3627625	
(Jurisdiction under the law o	which foreign limited liability company is organized)	J	(FEI no	unber, if applicable)
4	(Date hist transacted business in Florida, if pi	nor to registration.)	 	
	(See sections 605 0904 & 605 0905, F.S. to d	tetermine penalty habi		
5. 1299 Pennsylvania	(ve NW, Suite 300	6. <u>12</u>	99 Pennsylvania Ave	NW, Suite 300
Washington, DC 20	•	W	ashington, DC 20004	
7. Name and street add	ress of Florida registered agent: (P.O.	Box NOT acc	eptable)	
Name:	Corporation Service Company			
Office Address	1201 Hays Street			70 Z
	Tallahassee		, Florida 32301 (Zip	
Registered agent's acc	(City)			T
Having been named as designated in this appl to comply with the pro and accept the obligati	registered agent and to accept service cation, I hereby accept the appointments of all statutes relative to the propose of my position as registered agent Corporation Service Company By: **Registered** **	ent as registere coper and comp	the above stated limit d agent and agree to delete performance of n Emily (Asst. Vice P	ted liability company at the place, not in this capacity. I further agree my duties, and Fam fibriliar with
Having been named as designated in this appl to comply with the pro and accept the obligati 8. The name, title or c Title or Capacity	registered agent and to accept service cution, I hereby accept the appointments of all statutes relative to the propose of my position as registered agent Corporation Service Company By: The propose of the person(s) was and address of the person(s) was and Address: Margery Kraus 1299 Pennsylvania Ave 1299 Pe	ent as registere coper and comp	the above stated limit d agent and agree to delete performance of n Emily (Asst. Vice P hority to manage is/are or Capacity:	red liability company: at the placa- net in this capacity. I further agree ny duties, and I am familiar with Foft Resident Evan Kraus 1299 Pennslyvania Ave NW
Having been named as designated in this applies comply with the proand accept the obligation. 8. The name, title or caritle or Capacity. Executive Chairm	registered agent and to accept service cution, I hereby accept the appointmensions of all statutes relative to the propose of my position as registered agent. Corporation Service Company By: Registered agent and address of the person(s) was and Address: Margery Kraus 1299 Pennsylvania Ave Suite 300, Washington, I	ent as registere coper and comp	the above stated limit d agent and agree to delete performance of n Emily (Asst. Vice P hority to manage is/are or Capacity:	red liability company: at the placa- net in this capacity. I further agree ny duties, and I am familiar with Foft Resident Evan Kraus 1299 Pennslyvania Ave NW
Having been named as designated in this applied to comply with the proand accept the obligation. 8. The name, title or carries or Capacity. Executive Chairm CEO (Use attachments if no 9. Attached is a certification of the content of the conte	registered agent and to accept service cution, I hereby accept the appointmensions of all statutes relative to the propose of my position as registered agent. Corporation Service Company By: Tregistered agent and address of the person(s) we have and Address: Margery Kraus 1299 Pennsylvania Ave Suite 300, Washington, I suite 300, Washington, I seessary) ate of existence, no more than 90 days we of which it is organized. (If the cert	ent as registere coper and composition for the	the above stated limited agent and agree to a determent of mily Carry Carry Carry Carry to manage is/arc or Capacity: ident	red liability company: at the placa- net in this capacity. I further agree ny duties, and I am fabrilliar with Fost State Name and Address: Evan Kraus 1299 Pennslyvania Ave NW Suite 300, Washington, DC 2

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "APCO WORLDWIDE 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 THIRTIETH DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "APCO WORLDWIDE LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JUNE, A.D. 1991.

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

Authentication: 202174956

Date: 01-30-19

2267078 8300 SR# 20190617025