To: Page 2 of 4

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12122023573 From: Kimberly Laught

5/29/2019

Division of Corporations

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Florida Department of State

Division of Corporations

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

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITED TO REGISTER A FORFIGELUMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

fname unavailable, enter elsercate a	erns adopted for the purpose of transacting beginness in	in Florida. The alternate and anat include "Hathod Lashiday Company," "L.L.C." or "LLC.")
Delaware		3
(Jurisherion under the law of w	hidi faraga hinitad kability company is organized)	(MAL number, if applicable)
Upon Qualification		
	(Date fast transacted benoces at Horida; if pro (See sections 605.0904 & 605.0905, F.S. to de	or to regulation.) termine pesalty isolaty)
116 Huntington Avent		6. Same
(Streat Address of F	masipal ()ttice)	(Maiing Address)
Boston, MA 02116		
	55 of Florida registered agent: (P.O. 1	Pox NOT accentable)
Name and stroct adores		
NEme:	C T Corporation System	ن <u>ا</u> ند. ب
Office Address:	1200 South Pinc Island Road	
	Plantation	Floride 33324
egistered agent's accen	Plantation (City)	, Florida <u>33324</u> (74p code)
esignated in this application of the second se	(City) tance: gistered agent and to accept service tion, I hereby accept the appointment ions of all statutes relative to the pro- s of my position as registered agent.	(7up code) of process for the above stated limited liability company at the place at as registered agent and agree to act in this capacity. I further agree oper and complete performance of my duties, and I am familiar with
aving been named as re signated in this applical comply with the provisi	(City) tanco: gistered agent and to accept service tion, I hereby accept the appointment tions of all statutes relative to the pro-	(7up code) of process for the above stated limited liability company at the place int as registered agent and agree to act in this capacity. I further agree oper and complete performance of my duties, and I am familiar with Leslie Martin Assistant Secretary
aving been named as re- esignated in this applica comply with the provisi nd accept the obligation: . The name, title or capa <u>Title or Capacity:</u>	(City) tance: gistered agent and to accept service tion, I hereby accept the appointmen- tions of all statutes relative to the pro- s of my position as registered agent. By: C T Corporation System (Registered agent (Registered agent) (Registered agent) (Re	(7up code) of process for the above stated limited liability company at the place int as registered agent and agree to act in this capacity. I further agree oper and complete performance of my duties, and I am familiar with Leslie Martin Assistant Secretary
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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 eath 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 \$.817.155, F.S.

	Signature of an author Led person
Stephen Greene	
	Typed or printed parties of signed

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Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ATC EDGE 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 TWENTY-EIGHTH DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN



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SR# 20194651537 You may verify this certificate online at corp.delaware.gov/authver.shtml



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