

M19000005604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

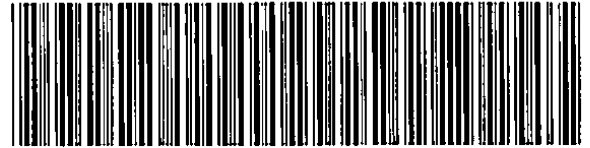
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700329928707

05/23/19--01031--021 ♦♦125.00

2019 MAY 29 A 3:42
MFLM ASSESS. FLORIDA

FILED

D SCOTT

JUN - 8 2019

HARBOR COMPLIANCE.

May 21, 2019

Florida Department of State

Foreign LLC Registration

Walter P. Moore Technology, LLC

To whom it may concern:

Please find the enclosed application and filing fee payment of \$125.

If you require any additional information or action, please do not hesitate to contact me at the information below.

Kind regards,

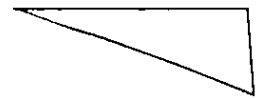


Dan Trego
Compliance Analyst

Web | www.harborcompliance.com

Direct | 717-431-9018

E-Mail | dtrego@harborcompliance.com



2019 MAY 29 A 3:12
MILWAUKEE, WI

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Walter P. Moore Technology, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Matthew Groff

Name of Person

Harbor Compliance

Firm/Company

1830 Colonial Village Lane

Address

Lancaster, PA 17601

City/State and Zip Code

professionalservices@harborcompliance.com

E-mail address: (to be used for future annual report notification)

FILED
919 MAY 29 11 31 AM '12
CORPORATION SECTION

For further information concerning this matter, please call:

Matthew Groff

717

431-9169

Name of Contact Person

at (_____) _____
Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy

\$160.00 Filing Fee, Certificate
of Status & Certified Copy

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:

1. Walter P. Moore Technology, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name accepted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Texas 3. 82-2840626
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. <u>1301 McKinney St.</u> <small>(Street Address of Principal Office)</small> <u>Suite 1100</u> <u>Houston, TX 77010</u>	6. <u>1301 McKinney St.</u> <small>(Mailing Address)</small> <u>Suite 1100</u> <u>Houston, TX 77010</u>
---	--

FILED
 2019 MAY 29 A P 11:2
 LAW OFFICE

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: REGISTERED AGENTS INC.

Office Address: 7901 4TH ST N STE 300

ST PETERSBURG, Florida 33702
(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 duties, and I am familiar with and accept the obligations of my position as registered agent.

Bill Hume

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Manager
Name and Address: Name: Dilip Choudhuri
 Address: 1301 McKinney St.
 Suite 1100
 Houston, TX 77010
 Member
 Authorized Person
 Other _____ Other _____

Title or Capacity: Manager
Name and Address: Name: James Jacobi
 Address: 1301 McKinney St.
 Suite 1100
 Houston, TX 77010
 Member
 Authorized Person
 Other _____ Other _____

Manager Name: Thomas Magnusson
 Member Address: 1301 McKinney St.
 Authorized Suite 1100
 Person Houston, TX 77010
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

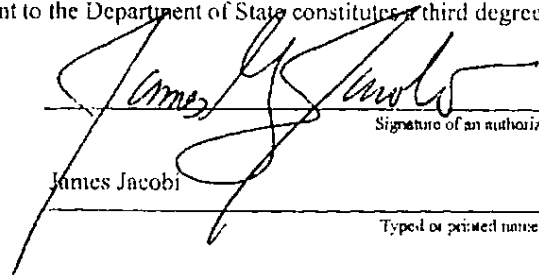
Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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. 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 s.817.155, F.S.



 Signature of an authorized person
 James Jacobi

 Typed or printed name of signee

FILED
 2013 MAY 29 AM 3:11:2



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Walter P. Moore Technology, LLC (file number 802793869), a Domestic Limited Liability Company (LLC), was filed in this office on August 17, 2017.

It is further certified that the entity status in Texas is in existence.

FILED
2019 MAY 29 A 3:42
DAVID WHITLEY

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 09, 2019.



Handwritten signature of David Whitley in black ink.

David Whitley
Secretary of State