

Foreign Limited Liability Company ST Shared Services LLC

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M. SOLOMON

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	TION 605,0902, FLORIDA STATUTES, THE FO ISINESS IN THE STATE OF FLORIDA;	LLOWING IS SUBMITTED TO REG.	ISTER A FOREIGN LIMITED LIABILITY
ST Shared Services LL	С		
(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LLC	····)
fatme unavailable, onter alternate n	ame adopted for the purpose of transacting business in Flori	to The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC.")
Delaware	high foreign limited limiting company is (equalized)	3. <u>84-3727053</u>	umber, if applicable)
	unu menga anales nanary cardamy or comused)		
Upon Qualification	(Date first innessected business in Forida, if prior to re (See sections 605.0004 & 605.6905, F.S. to determine	gistelion.)	
675 McDonnell Blvd.		6 Same	
(Street Address of I Hazelwood, MO 63042	•	0. (Atailing A	(ddress)
	· · · · · · · · · · · · · · · · · · ·	**************************************	2020
. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	C T Corporation System		
	1200 South Pine Island Road		- - -
Office Address:	1200 South Pine Island Road		
Office Address:	Plantation .	, Florida <u>33324</u>	
Office Address: egistered agent's accep	Plantation (Cny)	, Florida <u>33324</u> (Zip.	
egistered agent's accep laving been named as re	Plantation (Cny) tance: gistered agent and to accept service of pr	رېږې ocess for the above stated limit	ed liability company at the place
egistered agent's accep laving been named as re esignated in this applica o comply with the provisi	Plantation (Cny) tance: gistered agent and to accept service of pr tion, 1 hereby accept the appointment as ons of all statutes relative to the proper a	(75) cocess for the above stated limit registered agent and agree to a	ed liability company at the place ct in this capacity. I further agree
egistered agent's accep laving been named as re esignated in this applica o comply with the provisi	Plantation (Cny) tance: gistered agent and to accept service of pr tion. I hereby accept the appointment as fons of all statutes relative to the proper a s of my position as registered agent.	(2%) cocess for the above stated limit registered ugent and agree to a and complete performance of m	ed liability company at the place ct in this capacity. I further agree
egistered agent's accep laving been named as re esignated in this applica o comply with the provisi	Plantation (Cny) tance: gistered agent and to accept service of pr tion, 1 hereby accept the appointment as ons of all statutes relative to the proper a	(7%) cocess for the above stated limit registered agent and agree to a and complete performance of m	ed liability company at the place ct in this capacity. I further agree
egistered agent's accep laving been named as re esignated in this applica o comply with the provisi nd accept the obligation: 3. The name, title or capt	Plantation (Cny) tance: gistered agent and to accept service of pr tion. I hereby accept the appointment as ons of all statutes relative to the proper a s of my position as registered agent. By: C T Corporation System (Registered agent's sh acity and address of the person(s) who has	(759- cocess for the above stated limit registered agent and agree to a and complete performance of m MUL granue (have authority to manage is/are	ed liability company at the place ct in this capacity. I further agree y duties, and I am fumiliar with
egistered agent's accep laving been named as re esignated in this applica o comply with the provisi nd accept the obligation: 3. The name, title or capt <u>The or Capacity:</u>	Plantation (Cny) tance: gistered agent and to accept service of pr tion. I hereby accept the appointment as ons of all statutes relative to the proper a s of my position as registered agent. By: C T Corporation System (Registered agent's sign city and address of the person(s) who has <u>Name and Address:</u>	(7%) cocess for the above stated limit registered agent and agree to a and complete performance of m MU gnanwe)	ed liability company at the place ct in this capacity. I further agree y duties, and I am familiar with
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egistered agent's accep laving been named as re- esignated in this applica o comply with the provisi nd accept the obligation: 3. The name, title or capo <u>This or Capacity:</u> <u>MANAGER</u>	Plantation (Cny) tance: gistered agent and to accept service of pr tion. I hereby accept the appointment as ons of all statutes relative to the proper of s of my position as registered agent. By: C T Corporation System (Registered agent's signed and address of the person(s) who has <u>Name and Address:</u> Kathleen A Schaefer <u>675 McDonnell Blvd.</u> <u>Itazelwood, MO</u>	(759- cocess for the above stated limit registered agent and agree to a and complete performance of m MUL granue (have authority to manage is/are	ed liability company at the place ct in this capacity. I further agree y duties, and I am fumiliar with

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 1 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			
	Kathleon A schaffer	•	

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ST SHARED SERVICES 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 FIFTH DAY OF FEBRUARY, A.D. 2020.

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



of State

Authentication: 202327189 Date: 02-05-20

7497395 8300 SR# 20200834080

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