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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FEB 12 III) T. LEMEUX CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 177009 7930704

AUTHORIZATION : Smills

COST LIMIT : \$ (1/2)5_00

ORDER DATE: February 11, 2020

ORDER TIME : 1:47 PM

ORDER NO. : 177009-030

CUSTOMER NO: 7930704

FOREIGN FILINGS

NAME: CORTLAND PAYROLL SERVICES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

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:

L. Cortland Payroll Ser						
(Name of Foreign	n Limited Liability Company; must include "Limited	d Liability Co	mpany," "L.E.C.," or "EE0	C.")		
(If name unavailable, enter alternate :	naine adopted for the purpose of transacting business in Flor	rida. The alterna	se name muss include "Limuted	Liability Company." "L.L.C," or	r "LLC.")	
GA 2.		84-3541285 3.				
(funsdiction under the law of which foreign limited liability company is organized)		J	(FEI number, if applicable)			
01/30/2020						
	(Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, F.S. to determine	rgstratioπ.) ne penalty liabili	ty)			
3424 Peachtree Road, Suite 300 5. (Street Address of Principal Office)		3424 Peachtree Road, Suite 300				
		6	(Mailing /	Address		
Atlanta, GA 30326			Atlanta, GA 30326			
				23. 23		
				1 63	-17	
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acces	otable)	E		
			,		! []]	
Name:	Corporation Service Company			Ta To	\Box	
				مين المين مين المين المين	-	
Office Address:	1201 Hays Street))	
	Tallahanna			.,,,,		
	Tallahassee		32301 , Florida (Zipo			
	(City)		(Zip o	code)		
Registered agent's accep						
Having been named as re designated in this applica	gistered agent and to accept service of pa tion, I hereby accept the appointment as	rocess for t. registered	he above stated limit ogent and opree to a	'ed liability company a oct in this canacity. I fi	t the place urther nore	
to comply with the provisi	ons of all statutes relative to the proper	and comple	te performance of m	v duties, and I am fan	iiliar with	
and accept the obligations	s of my position as registered agent.	`		desha Roberson		
	Comditation Service Company	<i>,</i> _		t. Vice President		
	Corpdration Service Company By: 1000					
	(Registered agent's si	Bustac)				

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: Name and Address: Title or Capacity: Name and Address: Cortland Holdings, LLC × Manager Manager Name: 3424 Peachtree Road, Suite 300 Member Address: Member Address: Authorized Authorized Atlanta, GA 30326 Person Person Other Other Other_ Other Manager Name: Manager Name: Member Address: Member Address: Authorized Authorized Person Person Other_ Other____ Other Other Manager Manager Name: ____ Member Member Address: _____ Authorized Authorized Person Person __Other____ Other Other Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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 Steven DeFrancis

Typed or printed name of signer

Control Number: 19142578

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, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

CORTLAND PAYROLL SERVICES, 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 : 18571586 Date Inc/Auth/Filed: 10/24/2019 Jurisdiction : Georgia Print Date : 02/11/2020

Form Number : 211



Brad Rafforspage

Brad Raffensperger Secretary of State