

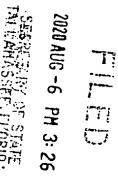
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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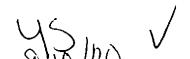
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# FLORIDA DEPARTMENT OF STATE Division of Corporations

July 22, 2020

OBIE BRYANT, JR. 755 COMMERCE DRIVE STE:615 DECATUR, GA 30030

SUBJECT: BRYANT SAFETY AND SECURITY SOLUTIONS, LLC

Ref. Number: W20000077279

We have received your document for BRYANT SAFETY AND SECURITY SOLUTIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 820A00013781

RECEIVED AUG 0 6 2020

PIS See attacked updated certilizate

### **COVER LETTER**

Name of Limited Liability Company  renclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." C stence, and check are submitted to register the above referenced foreign limited liability company to transact busines  asse return all correspondence concerning this matter to the following:  Obie Bryant, Jr  Name of Person  Bryant Safety and Security Solution, LLC  Firm/Company  755 Commerce Drive, Ste 615  Address  Decatur, GA 30030  City/State and Zip Code  obie.bryant@bryantsafetysecurity.com  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  Obie Bryant Jr  Name of Contact Person  Mailing Address:  Registration Section Division of Corporations P.O. Box 6327  The Centre of Tallahassee	Bryant Safety and Security Soluti	ions, LLC
Stence, and check are submitted to register the above referenced foreign limited liability company to transact busines as as return ali correspondence concerning this matter to the following:  Obie Bryant, Jr  Name of Person  Bryant Safety and Security Solution, LLC  Firm/Company  755 Commerce Drive, Ste 615  Address  Decatur, GA 30030  City/State and Zip Code  obie.bryant@bryantsafetysecurity.com  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  Obie Bryant Jr  Name of Contact Person  Mailing, Address: Registration Section Division of Corporations P.O. Eox 6327  The Centre of Tallahassee	B0001.	Name of Limited Liability Company
Obie Bryant, Jr  Name of Person  Bryant Safety and Security Solution, LLC  Firm/Company  755 Commerce Drive, Ste 615  Address  Decatur, GA 30030  City/State and Zip Code  obie.bryant@bryantsafetysecurity.com  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:  Obie Bryant Jr  Name of Contact Person  Mailing Address: Registration Section Division of Corporations P.O. Eox 6327  The Centre of Tallahassee	e enclosed "Application by Foreign Limited stence, and check are submitted to register t	Liability Company for Authorization to Transact Business in Florida," Control the above referenced foreign limited liability company to transact business.
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City/State and Zip Code  Obie.bryant@bryantsafetysecurity.com  E-mail address: (to be used for future annual report notification)  Further information concerning this matter, please call:  Obie Bryant Jr  Name of Contact Person  Mailing Address: Registration Section Division of Corporations P.O. Eox 6327  City/State and Zip Code  Daytime Telephone Number  Street Address: Registration Section Division of Corporations The Centre of Tallahassee	<del></del>	Firm/Company
City/State and Zip Code  obie.bryant@bryantsafetysecurity.com  E-mail address: (to be used for future annual report notification)  Further information concerning this matter, please call:  Obie Bryant Jr  Name of Contact Person  Mailing Address: Registration Section Division of Corporations P.O. Eox 6327  City/State and Zip Code  Activation Section Division of Corporations Division of Corporations The Centre of Tallahassee	755 Commerce Drive, Ste 61	<b>7020 A</b>
City/State and Zip Code  Obie.bryant@bryantsafetysecurity.com  E-mail address: (to be used for future annual report notification)  Further information concerning this matter, please call:  Obie Eryant Jr  Name of Contact Person  Mailing Address: Registration Section Division of Corporations P.O. Box 6327  City/State and Zip Code  To 2  A 2  STA 2856  Daytime Telephone Number  Street Address: Registration Section Division of Corporations The Centre of Tallahassee		Address
Obie Bryant @bryantsafetysecurity.com  E-mail address: (to be used for future annual report notification)  Further information concerning this matter, please call:  Obie Bryant Jr  Name of Contact Person  Mailing Address: Registration Section Division of Corporations P.O. Eax 6327  The Centre of Tallahassee	Decatur, GA 30030	
E-mail address: (to be used for future annual report notification)  Further information concerning this matter, please call:  Obie Bryant Jr  Name of Contact Person  Mailing Address: Registration Section Division of Corporations P.O. Eox 6327  E-mail address: (to be used for future annual report notification)  537-2856  Area Code Daytime Telephone Number  Street Address: Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee		City/State and Zip Code
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Division of Corporations P.O. Eax 6327  Division of Corporations The Centre of Tallahassee		
P.O. Eox 6327 The Centre of Tallahassee	_	<u> </u>
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Tallahassee, FL 32303	Tallahassee, FL 32314	•

## 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. Bryant Safety and Security Solutions, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

	name adopted for the purpose of transacting bu	isiness til Florida. Fik		idde illinico E	,		
Georgia/ United States of	of America	3.	45-5340506 				
(Jurisdiction under the law of w	hich foreign limited liability company is organ	nized)		(FEI numb	er, it applie	able)	
N/A							
	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S	, if prior to registration to determine penalty	ı.) liability)		<del></del>		
755 Commerce Drive,	Ste 615		755 Commerce				
reet Address of Principal Office)		0.	(Mailing Addres	is)			
Decatur, GA 30030			Decatur, GA 300	030			
					20	202	
					OR STATE	2020 AU	•••••
					SESSE BA	AUG -	********
Name and street address	ss of Florida registered agent: (P	P.O. Box NOT	acceptable)		SHAN BART S	AUG -6	The same of the sa
Name and street address	ss of Florida registered agent: (P	P.O. Box <u>NOT</u>	acceptable)			AUG -6 PM	
	ss of Florida registered agent: (P Bryant, Obie Jr	P.O. Box <u>NOT</u>	acceptable)		SASK TORY OF STATE	AUG -6 PM 3:	
Name and street address Name:	Bryant, Obie Jr	?.O. Box <u>NOT</u>	acceptable)			AUG -6 PM	
		P.O. Box NOT	acceptable)			AUG -6 PM 3:	
Name:	Bryant, Obie Jr	P.O. Box <u>NOT</u>		33407 (Zip code)		AUG -6 PM 3:	

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:

Mame and Address:

Address: 1133 Commerce Dr. Address: \_\_\_\_\_ \_ ☐ Member ☐Member Apt 405 □ Authorized ☐ Authorized Decatur, GA 30030 Person Person President □Other\_\_\_\_\_\_ □Other\_\_\_\_\_ □Other \_\_\_\_\_ Other □Manager Name: □Manager Address: \_ૠૼૺૺ૾ □Member Address: ☐ Member □ Authorized □ Authorized Person Person □Other\_ □Other □Other \_\_\_\_\_ Name: \_\_\_\_\_ □Manager Name: \_ ■ Manager □Member Address: \_\_\_\_\_\_ Address: \_\_\_\_\_\_ ☐ Member □ Authorized ☐ Authorized Person Person

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.

□Other \_\_\_\_

□Other \_\_\_\_

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)

□Other \_\_\_\_

□Other \_\_\_\_\_\_

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.

Olic Bryant Jr

Signature of an authorized person

Typed or printed name of signee

Control Number: 12074248

## 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

#### BRYANT SAFETY AND SECURITY SOLUTIONS, 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 grovisions 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 is ued. 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 : 19474380 Date Inc/Auth/Filed: 09/16/2012 Jurisdiction : Georgia Print Date : 08/04/2020

Form Number : 211



Brad Raffersperger

Brad Raffensperger Secretary of State