4/26/2021 Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:	
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Foreign Limited Liability Company HEARTLAND CUSTOMER SOLUTIONS, LLC

Certificate of Status	0
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Page Count	04
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Del Tracy Kellner Assistant Secretary

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	REIGN LIMITED LIABILITY CO IN F	LORIDA			
COMPLANCE WITH SEC IMPANY TO TRANSACT BO	TION 605.0902, FLORIDA STATUTEŠ. TIJE . SINESS IN THE STATEOF FLORIDA:	POLLOVING IS	SUBMITTED TO RECENTER.	A RORPIGN TIMITE	ОПАВ
Heartland Customer So					_
(Name of Foreign)	tranted Liability Company; must include "Limi	ied Liaminy Con	many, refacts in race, y		
reme unavadable, enter akerrate n	ence adopted for the purpose of transacting business in	Florida The afterna	ue mane must probabe "Limited Lindi	lity Company," "L. L.C," or	FLLCT
Delaware			35-26134		
Duried often tasker the law of w	hith foreign himmed faibility company is organized.	3	(FII number,		
April 1, 2021				2 (}
7,411 1, 2021	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605,6903, F.S. to dete.	to registration.)		2021 APR 2 SECRETAR TALLAH	
1.470V (Americana), O and			^{igs} 106 Overbrook Road	F R	
14206 Overbrook Ross treat Address of Principal Office)		6	(Nating Address)		- [
		I	wood, KS 66224	SSE PA	ซี ซี
Leawood, KS 66224		1.Ca	WOOJ, N.5 07224	<u> </u>	_ [
				- F. 5	
					-
Name and street addres	s of Florida registered agent: (P.O. Be	ox <u>NOT</u> acce	piahle)		
Neine:	C T Corporation System				
INGLE.	1200 South Pine Island Road		_		
Office Address:	1200 South Pine Island Road		_		
	Plantation		33324		
	(Cay)		, Florida(Zip code)	_	

C.T. Corporation System

(Regulated agent's ogranue)

B<u>y:</u>

Page: 4 of 5

S. 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;
[]Manager	Panasonic Corporation of North America	□Manager	Name: Jayson Cummins
Member	Two Riverfront Plaza	□Member	Address
□Authorized	Newark, NJ 07102	■ Authorized	Leawood, KS 66224
Person		Person	President
□ Other	□Other	□Other	COther
□Manager	Jessica Hedkinson Namei	□Manager	Name: Stephen Weingarten
∐iMember	Address: Two Rivertiont Plaza	○Member	Address: Two Rivertion: 2020
© Authorized	Hewark, NJ 07102	■ Authorized	Newark, NJ 0740
Person	Secretary	Person	Assistant Secretary 2
□Other	Other	□ Other	PH 4: 45
∐Manager	Neme: Atrkah Aritin	□Manager	Name:
□ Member	Address: Two Rivertion: Plaza	□Member	Address:
E Authorized	Newark, NJ 67 102	□Authorized	
Person	Tax Officer	l'etson	
COther	□ Other	ETO(he:	(Dthat

important Notice. Use an attachment to report more than six (6). The attachment will be unaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

19. 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 flind degree felony as provided for in 8.817 155, F.S.

> Stophen C. Weingarten Lyped or printed name of signee

^{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)

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HEARTLAND CUSTOMER SOLUTIONS, 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-SIXTH DAY OF APRIL, A.D. 2021.

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

2021 APR 26 PH 4: 45
SECRETARY OF STATE

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6664484 8300 SR# 20211448757

Date: 04-26-21

Authentication: 203055559