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Thank you!

COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	ACTA, LLC IT:		
		ne of Limited Liability Company	
		Company for Authorization to Transact Business in Florida.' referenced foreign limited liability company to transact business	
lease re	turn all correspondence concerning this matter	to the following:	
	Susan M. Young		
		Name of Person	
	ADPD Holdings LLC		
		Firm/Company	
	3700 Arco Corporate Drive, Suite 125	5	
		Address	
	Charlotte, NC 28273		
	(City/State and Zip Code	
	syoung@nearu-services.com		~2
	E-mail address: (to b	e used for future annual report notification)	, 1531 c
For furth	er information concerning this matter, please ca	dI:	
Susan M. Young		980 263-2520 at ()	5
	Name of Contact Person	Area Code Daytime Telephone Number	· · · · · · · · · · · · · · · · · · ·
	Mailing Address: Registration Section Division of Comparations	Street Address: Registration Section Division of Corporations	
Division of Corporations P.O. Box 6327		The Centre of Tallahassee	
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEI \$125.00 Filing Fee \$130.00 Filing Fe Certificate	ee & 🔲 \$155.00 Filing Fee & 🖂 \$160.00 Filing Fee.	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name mavailable, enter alternate n	ame adopted for the purpose of transacting business in Fl	orida The	alternate name must include "Limited Liability Comp	eany," "L.L.C," or "I	
North Carolina			88-0739854		
(Jurisdiction under the law of which foreign limited liability company is organized)		3.	3. (FEI number, it applicable)		
N/A					
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration ne penalty	L) liab(lity)		
3700 Arco Corporate Drive, Suite 125		,	3700 Arco Corporate Drive, Suite 12	15	
eet Address of Principal Office)		0.	(Mailing Address)		
Charlotte, NC			Charlotte, NC		
28273			28273	16.	
Name and street addres	s of Florida registered agent: (P.O. Box	NOT:	acceptable)		
Name:	C T Corporation System			اں 	
Office Address:	1200 S. Pine Island Road			L. 10: 30	
	Plantation		33324 , Florida		

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 pegisfered agent.

(Reportered agent's signature

Stephen Rullis, Vice President

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■ Manager	Name: ADPD Holdings LLC	□Manager	Name: Ashish Achlerkar
■Member	Address: 3700 Arco Corporate Drive	□Member	Address: 3700 Arco Corporate Drive
□Authorized	Suite 125	Authorized	Suite 125
Person	Charlotte, NC 28273	Person	Charlotte, NC 28273
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name: Kelly Hill
□Member	Address: 3700 Arco Corporate Drive	□Member	Address: 3700 Arco Corporate Drive
■ Authorized	Suite 125	■ Authorized	Suite 125
Person	Charlotte, NC 28273	Person	Charlotte, NC 28273
□Other	Other	Other	Other
			677 5
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	<u>ਦ</u> ਨੇ
□Other	Other	□Other	Other
indexed individuals indexed individuals in 9. Attached is a certical purisdiction under the of the translator mus	s executed in accordance with section 605.02	Florida Department of State d, duly authenticated by the cate is in a foreign language 203 (1) (b), Florida Statutes	Annual Report form. official having custody of records in the a translation of the certificate under oa I am aware that any false information
	nent to the Department of State constitutes a	unia degree serony as prom	oca ioi iii sioi i i i oci i i ioi.

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

ACTA, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 9th day of February, 2022

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.







Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 14th day of September, 2022.

Elaine I Marshall

Secretary of State