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CULP ELLIOTT & CARPENTER, P.L.L.C.

Attorneys at Law

*In memory of Partner
Douglas P. Munson
1958 - 1992*

*William R. Culp, Jr.
W. Curtis Elliott, Jr.
John Joseph Carpenter
Christopher E. Hannum
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John J. Nail
John R. Sechrist, II
Andrew E. Schwarz
Andrew L. Dinkelacker
Zachary J. Moulton*

November 2, 2016

VIA FEDERAL EXPRESS

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Cir.
Tallahassee, FL 32301

RE: Verigent Management, Inc.

Dear Sir or Madam:

Enclosed herewith please find the cover letter, original Articles of Incorporation and two (2) copies for the incorporation of Verigent Management, Inc. in Florida. A check in the amount of \$87.50 is also enclosed for the filing fee. Please file the Articles of Incorporation and return a certified copy and certificate of status to me in the enclosed self-addressed, postage paid FedEx envelope. Thank you for your assistance with this matter. If you need anything further, please let me know.

Sincerely,

CULP ELLIOTT & CARPENTER, P.L.L.C.

Wendy S. Hall, NCSB Certified
Senior Paralegal

Enclosures

32052_02:885699

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Verigent Management, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Wendy S. Hall/Culp Elliott & Carpenter, P.L.L.C.

Name (Printed or typed)

4401 Barclay Downs Dr., Suite 200

Address

Charlotte, NC 28209

City, State & Zip

(704) 973-5342

Daytime Telephone number

kkieman@verigent.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Verigent Management, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

149 Plantation Ridge Dr., Suite 100

Mooreville, NC 28117

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in the business of providing executive, management and administrative services.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: C T Corporation System

Address: 1200 South Pine Island Rd.

Plantation, FL 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Christopher E. Hannum

Address: 4401 Barclay Downs Dr., Suite 200

Charlotte, NC 28209

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Nathan Giffin Nathan Giffin, Assistant Secretary
Required Signature/Registered Agent

10/28/2016
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Required Signature/Incorporator

Date

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: C T Corporation System
Address: 1200 South Pine Island Rd.
Plantation, FL 33324

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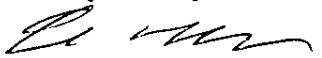
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Required Signature/Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.



Required Signature/Incorporator

10/31/16

Date