## P24000011399

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## **CT CORP**

( A 1 )

## (850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

02/12/2024

D	ate:	02/12/2024	- w: DW
		Acc#I20160000072	4: ( ) = V
Name:	BTS Topco	o, Inc.	
Document #:			
Order #:	15366844		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination:  Number of Certs:	
Filing:	Certified Plain: COGS:		Email Address for Annual Report Notification  jidavis@foley.gom B
Availability  Document  Examiner  Updater  Verifier  Ref#	Amount	\$ 78.75	AP 8: 04 SEE, FL

Thank you!

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

ARTICLE I NA.	<u>ME</u>	BTS Topco, Inc.					
The name of the corp			<u> </u>				
ARTICLE II PR	INCIPAL OFFIC	<u>E</u>					
3015 US HYW 193	Principal <u>stree</u>	et address	1	Mailing address, if	different	is:	
Perry, FL 32347					<u> </u>		
		<del></del>				_	
<del>-</del>							<del></del>
ARTICLE III PU	<u>RPOSE</u>	any and	all lawful business.				
The purpose for whi	ch the corporation	n is organized is:		<u> </u>			
		· •==					
							<del></del>
ADTICLE III GII	AREC						
ARTICLE IV SIII The number of share	s of stock is: 100						
ARTICLE V IN	TIAL OFFICERS	S AND/OR DIRECTORS					
			ector)	Leah R. Mersch	man <i>4</i> ⊋r	os & Dir	ector)
Name and	litle:	k Merschman (Sec & Dire	Name and Title		¥S	27	
Address	3015 US HYV	W 19 N	Address:	3015 US HYW 1	9 X Z	124 FEB	<u></u>
	Perry, FL 323	347		Perry, FL 32347	P	8	ď
		<del></del>	<del>_</del>		S	7	1
					<u> </u>	<u>**</u>	-F
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Name and T	itle:		Name and Title	;	FAT	89	
					بن	7	
Address			Address:				
			<del></del>				
Name and T	'itle:		Name and Title	<u> </u>			
Address			Addrace:				
Address	-	<u>.                                      </u>	Address.				

Name and	l Title:	Name and Title:	
· Address		Address:	
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) o CT Corporation System	f the registered agent is:	
Address:	1200 South Pine Island Road	_	
	Plantation, FL 33324	_	
	INCORPORATOR		
	Idress of the Incorporator is:  Jacob Davis		
Name:	<del></del>	-	
Address:	2021 McKinney Ave Suite 1600	_	
	Dallas, TX 75201	_	
Effective date, if (If an effective d filing.)  Note: If the date	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and cann inserted in this block does not meet the applicable ffective date on the Department of State's records	ot be more than five days prior or 90 da e statutory filing requirements, this date wi	
Having been nam certificate, I am fo	ned as registered agent to accept service of process jamiliar with and accept the appointment as registed Olga Hinkel  VP	for the above stated corporation at the place red agent and agree to act in this capacity (2/9/2029	Edesignated in Alis
	Required Signature/Registered Agent		Date O
I submit this doc	ument and affirm that the facts stated herein are Department of State constitutes a third degree felor	true. I am aware that the false informating as provided for in s.817.155, F.S.	on submitted in a
Jacob Pavis	·	2/9/20	024
Required Signatu	re/Incorporator	Date	