

DATE 09/19/2023

Document(s)

DOCUMENT ID 202326105204

DESCRIPTION FOREIGN LLC - CERTIFICATE OF REGISTRATION (LFP)

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Receipt

This is not a bill. Please do not remit payment.

CT CORPORATION SYSTEM 4400 EASTON COMMONS SUITE 125 COLUMBUS, OH 43219

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose 5113322

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

AZTECA SYSTEMS, LLC

and, that said business records show the filing and recording of:

FOREIGN LLC - CERTIFICATE OF REGISTRATION

Effective Date: 09/18/2023

Document No(s):

202326105204



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 19th day of September, A.D. 2023.

Ohio Secretary of State

Fred Johne

Form 617 Prescribed by:



Date Electronically Filed: 9/18/2023

Telphone: 877.767.3453

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

Registration of a Foreign Limited Liability Company

For a Foreign (Non-Ohio) Limited Liability Company
Filing Fee: \$99
Form Must Be Typed
106-LFA

Name of Limited Liability Company in its jurisdiction of formation						
Azteca System	s, LLC					
Assumed Nam	e, if the name above does no	t comply with section 1	706.07 of the Revised Cod	de		
(Name	must include one of the following wo	ords or abbreviations: "limite	d liability company", "limited", "LL	C", "L.L.C.", "ltd.", or "ltd".)		
Jurisdiction of fo	ormation DE					
The foreign limi	ted liability company is a fore	ign limited liability com	pany.			
Optional:	Effective Date (MM/DD/YYYY)	9/18/2023	Effective	Time		
Secretary of Sta days following the	te for filing under this chapte	r may specify an effect	ive time and a delayed effe	company delivered to the Ohio ective date of not more than ninet iability is effective as provided in		
If applicable, attach information required in section 1706.511(C) if the foreign limited liability company establishes or provides for the establishment of one or more series of assets.						

Original Appointment of Statutory Agent														
The undersigned authorized member(s), manager(s) or representative(s) of														
Azteca Systems, LLC														
(Name of Limited Liability Company)														
hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is:														
C T CORPORATION SYSTEM														
(Name of Statutory Agent)														
4400 EASTON CMNS STE 125														
(Mailing Address)														
COLUMBUS								43219						
						(Mailing	g State)		(Mailing ZIP Co	ode)				
					Acce	ptance	of A	ppoin	tment					
T.	СТС			ION S	VOTEN	1]		
The Undersigned,		C T CORPORATION SYSTEM (Name of Statutory Agent)							j , nai	med herein a	s tne			
Statutory agent for Aztec			eca Systems, LLC											
, ,	_imited Liab	red Liability Company)												
hereby acknowledges and accepts the appointment of statutory agent for said limited liability company.														
Statutory Agent Signature CANDICE PIGNATARO, ASST. SECRETARY														
		(In	dividual Ag	ent's Sig	gnature /	Signature o	on Beha	alf of Bus	iness Servin	g as Agent	1			

By signing and submitting this form has the requisite authority to execut	to the Ohio Secretary of State, the undersigned hereby certifies that he or she e this document.					
Deguired						
Required	JENNIFER ALLISON					
This filing must be signed by at least one person authorized by	Signature					
the limited liability company.	AZTECA SYSTEMS MIDCO, LLC					
If the person is an individual, then he or she must sign on the "signature" line and print his or her name in the "Print Name"	By (if applicable)					
Box.	Drint Nove c					
If the person is a business entity, please print the name of the entity in the "Signature" box and	Print Name					
an authorized representative of						
the business must sign in the "By" box and print his or her name and title or authority in the "Print Name Box."	Signature					
	By (if applicable)					
	Print Name					
	Signature					
	By (if applicable)					
	Print Name					