

### State of Rhode Island and Providence Plantations Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

# **Application for Certificate of Authority Foreign Business Corporation**

Filing and License Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:				
Super Systems, Incorporated				
2. It is incorporated under the laws of:	Georgia			
3. The name, if different, which it elects to use in Rhoo	le islant is:			
(a) If the name of the corporation in its jurisdiction of in "incorporated", or "limited," or an abbreviation thereof, the above corporate endings for use in Rhode Island:	ncorporation does not contain the word "corporation", "company", then list the name of the corporation with the addition of one of			
(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:				
4. The date of its incorporation is:	August 11, 2008			
And the period of its duration is: CHECK ONLY ONE I  Perpetual (on-going)	вох			
Date certain for dissolution				
5. The address of its principal office is:				
525 South Independence Blvd, Virginia Beach, VA 23452				

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6. The name and addr	ress of the initial regis	tered agent/c	office of in Rhode Isla	ind:	
Agent Name InCor	p Services, Inc.				
Street Address (NOT a	a P.O. Box) 222 Je	fferson Bl	vd, Suite 200		
City/Town Warwick	wick		te RHODE ISLAND	Zip Code <b>02888</b>	
7. The purpose of purp	ooses Which it propos	es to pursue	in the transaction of	business in Rhode Island are:	
Providing IT serv	rices to its custo	mers			
state or country of which	ch it is incorporated):	of its directo	rs (optional, unless d	irectors are required under the laws of the	
NAME	NAME ADDRESS				
John D. Renals	259	6 Briers N	lorth Drive, Atlar	nta, GA 30360	
Michael D. Kreide	r 202	9 Bay Bre	Breeze Cove, Virgina Beach, VA 23454		
				eck the box to indicate an attachment.	
8. (b) The names and r laws of the state or cou			al officers (mandator)	y if directors are not required under the	
OFFICE	NAN	<i>A</i> E		ADDRESS	
PRESIDENT	Michael D. Kreider		2029 Bay Breeze Cove, Virgina Beach, VA 2		
VICE PRESIDENT	John D. Renals		2596 Briers North Drive, Atlanta, GA 30360		
TREASURER	John D. Renals		2596 Briers North Drive, Atlanta, GA 30360		
SECRETARY	Michael D. Kreider		2029 Bay Breeze Cove, Virgina Beach, VA 2		
			Che	eck the box to indicate an attachment.	
The aggregate numb without par value, and s	er of shares which it series, if any, within a	has authority class, is:	(to issue; itemized by	/ classes, par value of shares, shares	
NUMBER OF SHARES	CLASS	## Посторы поставляющий поставляющий поставляющий поставляющий поставляющий поставляющий поставляющий поставля	SERIES	PAR VALUE OR STATE NO PAR VALUE	
5,000	5,000 Common N			No par value	
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0. (a) Estimate, in dollars, the value of all pro	operty to be owned by the corporation for t	ne following year wherever
ocated:		
\$_\$15,000		
<ul> <li>Estimate, in dollars, the value of the corpora ear.</li> </ul>	ation's property to be located within Rhode	Island during the following
\$		
<ul> <li>Estimate, as a percentage, the proportion trithin this state during the following year bears ollowing year, wherever located. Note: Divide (</li> </ul>	to the value of all property of the corporat	ion to be owned during the
%		
1. (a) Estimate, in dollars, the gross amount of	business to be transacted by the corporation	on during the following year.
\$		
Estimate, in dollars, the gross amount of but     Rhode Island during the following year.	siness to be transacted by the corporation	at or from places of business
\$_ <sup>80,000</sup>		
<ul> <li>Estimate, as a percentage, the proportion of r from places of business in Rhode island duri- e transacted by the corporation during the folk ercentage.</li> </ul>	ng the following year compared to the gro	ss amount thereof which will
0.67 %		
<ol><li>This application must be accompanied by a filter of the state or country under the laws of ocument.</li></ol>		
3. Date when the Certificate of Authority will be	e anactive: CHECK ON YONE BOX	atarapinis (2001) nga sakabutan 1901 nga sakabuta Daga tauta nga sakabutan nga sakabutan 1901, nga nagasabatan
☑ Date received (Upon filing)		
Later effective date (Date must be no more	e than 90 days from the day of filing)	
nder penalty of perjury, I declare and affirm th ny accompanying attachments, and that all sta		
gnature of Authorized Officer of the Corporation	Type or Print Name of Authorized Officer	Date
81GN DOCUMENT HERE	John D. Renals	1/26/16
	<u> </u>	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

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Control Number: 08062530

# STATE OF GEORGIA

# **Secretary of State**

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### SUPER SYSTEMS, INCORPORATED

#### a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

: 13184299 : 08/11/2008 : Georgia : 05/25/2016 : 211



B: P. Kemp Secretary of State I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

