

PS Comm, Inc
M01000000502

Requester's Name

One Church Street, Ste. 900

Address

Rockville, MD 20850

City/State/Zip

Phone #

MJH

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. 00789-00644-00671

(Corporation Name)

(Document #)

W01-4130

2.

(Corporation Name)

(Document #)

900003743429--8

-02/20/01--01079--002

****125.00 ****125.00

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

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Walk in

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Pick up time

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Certified Copy

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Mail out

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Will wait

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Photocopy

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Certificate of Status

NEW FILINGS

☐

Profit

☐

Not for Profit

☐

Limited Liability

☐

Domestication

☐

Other

AMENDMENTS

☐

Amendment

☐

Resignation of R.A., Officer/Director

☐

Change of Registered Agent

☐

Dissolution/Withdrawal

☐

Merger

OTHER FILINGS

☐

Annual Report

☐

Fictitious Name

REGISTRATION/QUALIFICATION

☐

Foreign

☐

Limited Partnership

☐

Reinstatement

☐

Trademark

☐

Other

FILED
01 MAR -6 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 21, 2001

PSCOMM, LLC
ONE CHURCH STREET, STE 900
ROCKVILLE, MD 20850

SUBJECT: PSCOMM, LLC
Ref. Number: W01000004130

We have received your document for PSCOMM, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 201A00011049

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. PS Comm, LLC
(Name of foreign limited liability company)
2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 52-2052548
(FEI number, if applicable)
4. 8-25-97
(Date of Organization)
5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. ONE CHURCH STREET, SUITE 900
ROCKVILLE, MD 20850
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☐
9. The name and usual business addresses of the managing members or managers are as follows:
JOHN COHEN - ONE CHURCH ST. #900, ROCKVILLE, MD 20850
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: CONSULTING

JOHN D. COHEN
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOHN D. COHEN

Typed or printed name of signee

FILED
01 MAR -6 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

PS Comm, LLC

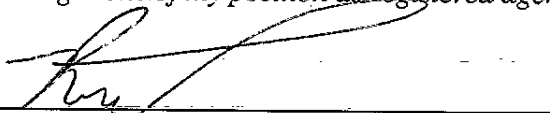
2. The name and the Florida street address of the registered agent and office are:

MR. ROBERT STEWART
(Name)

9775 WYNTREE LANE
Florida street address (P.O. Box **NOT** ACCEPTABLE)

TALLAHASSEE, FL 32311
City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

State of Delaware
Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PSCOMM, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF FEBRUARY, A.D. 2001.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

2788726 8300

AUTHENTICATION: 0952119

010055004

DATE: 02-02-01