# MB000010376

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Emily Name)
(Danisa Nisaba)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





900319765009

10/18/18--01035--010 \*\*125.00





October 29, 2018

DOUGLAS C GAFFNEY 1201 INDIAN CHURCH RD WEST SENECA, NY 14224

SUBJECT: INSTREAM, LLC Ref. Number: W18000094870

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 718A00022234

#### COVER LETTER

TO:		ration Section on of Corporation	18				
SUBJI		Stream, LLC					
.90/1947			Name of	Limited Liability (	Company	ST THE SLIL	
			reign Limited Liability Com d to register the above refer				
Please	return al	Ecorrespondence (	concerning this matter to the	following:			
		Douglas C. Ga	ffney				
			N'	ame of Person			-
		InStream. LLC					
		Pirm/Company					
		1201 Indian Church Rd					
	Address						-
		West Seneca, NY 14224					
			City/S	State and Zip Code		1.2.2	-
		dgaffney@instre					
			E-mail address: (to be use	d for future annual	report not	ification)	
For fur	ther info	rmation concernin	g this matter, please call:			· · · · · · · · · · · · · · · · · · ·	2
	Dougl	as C. Gaffney		716	675-86	25	π III
		Name c	f Contact Person	Area Code	Day	time Telephone Number	J
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		a W		
Enclos		neck for the follow 5.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co	

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

IN COMPLIANCE WITH SECTION 605.0902 FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSPICT BUSINESS IN THE STATE OF FLORIDA:

InStream, LLC	d Dability Course and Invoted Time	miled Liability Company," "LLC," or "(LC	
(If name mayariable, enter allemate name ado	pied for the purpose of trensacting lawiness in	Florida The alternate name must believe "Limited L	inhibity Company, " "I. L.C." or "LLC.")
2. Tennessee		3 80-0124375	, ,
Derisdiction under the law of which fore	ign limited liability company is oncarrized)	***************************************	mber, if applicable)
4. 03/01/2018			
(D (S:	ato first transacted business in Florida, il priore sections 605,0901 & 605,0905, F.S. to dete	to registration.)	= = = = = = = = = = = = = = = = = = = =
5 240 Great Circle Rd, Ste 342			
(Street Address of Principal		6. 240 Great Circle Rd, Ste :	142
Nashville, TN 37228		Nashville, TN 37228	nress)
		74311VIIIC, 11/3/228	
		. On the street way, represent the way, representation of the street of	
7. Name and street uddress of Fl	orida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)	₩ \$*
Name: JENNIFE	R M. VAN HART		
Office Address: 192	5 A NW 2nd Street	3	
GAIN <del>ESV</del>	ILLE Ord		
Registered agent's acceptance:	Ca(g)	(Zip cod	(e)
	all statutes Lelative to the prope	f process for the above stated limited as registered agent and agree to act or and complete performance of my	
	, -		
8. The name, title or capacity an Title or Capacity:	d address of the person(s) who I Name and Address:	nas/have authority to manage is/are:	
CEO/President	<del></del>	Title of Capacity:	Name and Address:
CISO/I resident	William Owens	Chairman	Mark Hinson
	240 Great Circle Rd, Ste 342 Nashyille, TN 37228	 	240 Great Circle Rd, Ste 342 Nashville, TN 37228
National Dir of Financ	Planalas I. Cations		
	Douglas C. Gattney 1201 Indian Church Rd		
	West Seneca, NY 14224	<u></u>	*
(Use attachments if necessary)	·.	- ,	
9. Attached is a certificate of exist jurisdiction under the law of which of the translator must be submitted	ence, no more than 90 days old, it is organized. (If the certifical)	duly authenticated by the official had to is in a foreign language, a translati	ving custody of records in the on of the certificate under oath
	providuant with an air and an a	3 (176). Florida Statutes. I am navaro and degree feloniyas provided for in 3	that any false information .317.155, F.5.
	-dinata:	en an awa. In seed blesses	
Willian	Owens		·
	Typed pe	printed name of signee	



## **Division of Business Services Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

Secretary of State

JENNI VAN HART 1925-A NW 2ND STREET GAINESVILLE, FL 32609

November 6, 2018

Request Type: Certificate of Existence/Authorization Request #: 0295186  Desument Receipt Receipt #: 004363122  Payment-Credit Card - State Payment Center - CC #: 3743272085			Issuance Date: 11/06/2018 Copies Requested:		
			Filing Fee: ⇔ \$20.00		
Regarding: Filing Type: Formation/Qualific Status: Duration Term:	INSTREAM, LLC Limited Liability Company - Domeation Date: 10/14/2004 Active Perpetual DAVIDSON COUNTY		Control # : 479435 Date Formed: 10/14/2004 Formation Locale: TENNESSEE Inactive Date:		

### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of

#### INSTREAM, LLC

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above,
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has

Secretary of State

Processed By: Cert Web User

Verification #: 030426322