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SECRETARY OF STATE TABLAHASSEE, FLORIDA



May 16, 2011

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

RE: APPLICATION FOR CERTIFICATE OF AUTHORITY

To Whom It May Concern:

Please find the attached Application and supporting documentation required for a Certificate of Authority to transact business in the State of Florida. Please contact us at the address below if you have questions. We will appreciate your immediate attention to this matter.

Sincerely,

Tony D. Cash General Counsel

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 365 WIRELESS, LLC Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," C Existence, and check are submitted to register the above referenced foreign limited liability company to transact business	
Please return all correspondence concerning this matter to the following:	•
TONY CASH Name of Person	
Name of Feison	
365 WIRELESS, LLC	
Firm/Company	
1500 TROTTERS COVE	
Address	
ATLANTA, GA 30338	
City/State and Zip Code	
LEGAL@365WIRELESS.NET	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TONY CASH at (404) 281-3377	
Name of Person Area Code & Daytime Telephone Number	
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sigma\$	

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

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

1. 365 WIRELESS, LLC	
(Name of Foreign Limited Liability Company; must include	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpos consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the writter nate name. The alternate name must include "Limited Liability
2. GEORGIA (Jurisdiction under the law of which foreign limited liability company is organized) 3.	(FEI number, if applicable)
4. <u>03/29/2011</u> (Date of Organization) 5.	PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)
7. 1500 TROTTERS COVE ATLANTA, GA 30338	
(Street Address of	of Principal Office)
8. If limited liability company is a manager-managed of	company, check here
9. The name and usual business addresses of the mana	ging members or managers are as follows:
BRIDGETT WELLER	
1500 TROTTERS COVE ATLANTA, GA 3033	8
10. Attached is an original certificate of existence, no more than 90 date in the purisdiction under the law of which it is organized. (A photocopy ranslation of the certificate under oath of the translator must be subm	ays old, duly authenticated by the official having custody of records in is not acceptable. If the certificate is in a foreign language, a
1. Nature of business or purposes to be conducted or	
	AA I
Signature of a member or an auti	horized representative of a member 5.214 11 75 75
(In accordance with section 608.408(3), F.S., the execut	tion of this document constitutes an affirmation
· · · · · · · · · · · · · · · · · · ·	I am aware that any false information submitted in a a third degree felony as provided for in s.817.155, F.S.)
BRIDGETT WELLER	

Typed or printed name of signee

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 Compa	iny is:		
If unavailable, the alternate to be used in the	state of Flor	rida is:	
2. The name and the Florida street address o	f the registe	ered agent and office	are:
, NRAI SERVICES, INC.		<u> </u>	
•	(Name)		•
 -	-		and the same of th
515 EAST PARK AVENUE	- بي	-	~
		NOT ACCEPTABLE)	**
	ess (P.O. Box	NOT ACCEPTABLE)	*

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, Florida Statutes.

Wendy D Rea, Assistant Secretary

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

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 110513800

CONTROL NUMBER : 11025121

DATE INC/AUTH/FILED: 03/29/2011

JURISDICTION : GEORGIA

PRINT DATE : 05/13/2011

FORM NUMBER : 211

365 WIRELESS, LLC TONY D. CASH 1500 TROTTERS COVE ATLANTA, GA. 30338

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

365 WIRELESS, LLC A DOMESTIC LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above 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 abovenamed 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.



Brian P. Kemp Secretary of State