## F0000001582

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: Jakeau Communications LLC (Name of corporation - must include suffix)		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.		
Please return all correspondence concerning this matter to the following:    Timothy   A   Peterson   -03/20/00-01118-018     (Name of Person)   ******87.50   ******87.50		
Jakean Communications LLC (Firm/Company)		
502 S. Fremont - 1417 (Address)		
Tampa FL - 33606 TALES & TALES & T		
Should you need to call someone concerning this matter, please call:		
(Name of Person) at (813) 258-6863  (Area Code & Daytime Telephone Number)		
STREET ADDRESS: MAILING ADDRESS:		
Qualification/Tax Lien Section  Qualification/Tax Lien Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  MAILING ADDRESS:  Qualification/Tax Lien Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		
Enclosed is a check for the following amount:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & Certificate of Status Certified Copy Certified Copy		

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (State or country under the law of which it is incorporated) (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Office Address: , Florida, \_33606 (Zip code) 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

Chairman: _	Timothy A. Potasan	- <u>- المراجعة المواجعة</u> - المواجعة
Address:		— 
	Tapa, FL 33606	, ; .
Vice Chairma	Lion C. Peterson	
Address:	sang	— · · · · · · · · · · · · · · · · · · ·
Director:		-
Director:		
B. OFFICE	S (Street address only - P.O. Box NOT acceptable)	
President:	70.9	
	ALCAR -	:
Vice President	NAT OF THE CONTRACT OF THE CON	•
Address:		·
Address:	Fis ≥ D 93 9	- 
	FLORIDA PROPERTY 19	- 
Secretary:	FLORIDA 19	
Secretary:	FLORIDA PROPERTY 19	
Secretary:	FLORIDA  FLORIDA	
Secretary: Address: Treasurer:	FLORIDA  FLORIDA	
Secretary:	FLORIDA  FLORIDA	
Secretary: Address:  Treasurer: Address:	FLORDE 19	
Secretary: Address:  Treasurer: Address:	FLORIDA  FLORIDA	
Secretary: Address:  Treasurer: Address:	sary, you may attach an addendum to the application listing additional officers and/or directors.	
Secretary: Address:  Treasurer: Address:	FLORDE 19	



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that a copy of the Articles of Organization and Initial Report of

Domiciled at BATON ROUGE, LOUISIANA,

Was filed and recorded in this Office on January 06, 2000,

And all fees having been paid as required by law, the limited liability company is authorized to transact business in this State, subject to the restrictions imposed by law, including the provisions of R.S. Title 12, Chapter 22.

JABEAU COMMUNICATIONS LLC

OO MAR 20 AM 9:19
SECRETARY OF STATE
ALLAHASSEF ELOPIA

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

January 6, 2000

ABA 34876224K Secretary of State

