# F00000005021

To: Registration Section
Division of Corporations

SUBJECT: COMMUN	ICATION MANAGEMEN	T SPECIALISTS, INC			
	(Name of corpor	ation - must include suffix)			
Dear Sir or Madam:					
The enclosed "Applicate "Certificate of Existence transact business in Flor	e", and check are submitted	for Authorization to Transact to register the above reference	ed foreign corporation to		
Please return all corresp	ondence concerning this ma	tter to the following:	SEP -		
<del></del>	BOB CALDWELL		- 2 <sup>2</sup> E		
	(Name	of Person)	AMIL: 13		
COMMI	JNICATION MANAGEME	ENT SPECIALISTS, I	ac.		
	(Firm/	Company)	3 OHS		
4700	S. BOWMAN RD., ST	፲፻፹፫ 10ስ			
		ddress)	· · · · · · · · · · · · · · · · · · ·		
LITTI	E ROCK, ARKANSAS	72210			
	(City/S	State/Zip) 200	0033833425 -09/06/0001022016 *****87.50 *****87.50		
Should you need to call someone concerning this matter, please call:					
		_			
BOB CALDWELL	at (501	228-8188	SSP OS Z		
(Name of Person	(Are	a Code & Daytime Telephor	ne Number)		
			Number) - O		
			<b>≩</b> ≤		
STREET ADDRESS:		MAILING ADDRESS:			
Registration Section		Registration Section	5-₹ S		
Division of Corporations		Division of Corporations	1		
409 E. Gaines St. Tallahassee, FL 32399		P.O. Box 6327 Tallahassee, FL 32314	2 9/7		
Enclosed is a check for the	following amount:		7011/		
☐ \$70.00 Filing Fee ☐	7	J \$78.75 Filing Fee & Ø Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy		



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 6, 2000

BOB CALDWELL COMMUNICATION MANAGEMENT SPECIALISTS 4700 SOUTH BOWMAN ROAD, SUITE 100 LITTLE ROCK, AR 72210

SUBJECT: COMMUNICATION MANAGEMENT SPECIALISTS, INC.

Ref. Number: W00000021825

We have received your document for COMMUNICATION MANAGEMENT SPECIALISTS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$87.50 payment.

Your application is fine, but in addition to the application, you must submit a CERTIFICATE OF EXISTENCE from the Arkansas Secretary of State. The certificate you have submitted is not for the corporation you are trying to qualify, but for another entity called CMS WIRELESS, LLC.

Please resubmit your application with a CERTIFICATE OF EXISTENCE for COMMUNICATION MANAGEMENT SPECIALISTS, INC.

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) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 600A00047166

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

IN COMPLIAN	NCE WITH SECTION 607.1503, FLORIDA STATUT	
REGISTER A F	FOREIGN CORPORATION TO TRANSACT BUSINE	ISS IN THE STATE OF FLORIDA. 🕒 🤿
(Name of corp	VICATION MANAGEMENT SPECIALISTS, reporation; must include the word "INCORPORATED", "Constitutions of like import in language in language."	COMPANY", "CORPORATION" or
natural person	previations of like import in language as will clearly indicate on or partnership if not so contained in the name at present	ite that it is a corporation instead of a
2. ARKANSAS	as 3. 7.	1-0780762 .
(State or count	ntry under the law of which it is incorporated)	(FEI number, if applicable)
4. October	r 1995 5. October 2	24, 2015
(D	Date of incorporation) (Duration:	Year corp. will cease to exist or "perpetual")
6. UPON QU	UALIFICATION	
(Date first trans	nsacted business in Florida. If corporation has not transact (SEE SECTIONS 607.1501, 607.150	ted business in Florida, insert "upon qualification.") 2 and 817.155, F.S.)
7. a. 4700	S. Bowman Rd., Suite 100, Little	e Rock, AR 72210
	(Principal office address)	
ь. 4700	S. Bowman Rd., Suite 100, Little	e Rock, AR 72210
	(Current mailing address)	
* *	ment of Wireless Communications N	
(Purpose	se(s) of corporation authorized in home state or country to	be carried out in state of Florida)
9. Name and str	treet address of Florida registered agent: (P.O. Bo	x or Mail Drop Box <u>NOT</u> acceptable)
Name:	Karl G. Lieblong, Jr.	
Office Address:	405 Inglewood Drive	
	Tallahassee, Flo	orida 32301
		(Zip code)
10 Dagistanad a	agantia accompany	

#### 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 business addresses of officers and/or directors:

A. DIRECT	ORS	9.00
Chairman: _	Phil Whisenhunt	<u> </u>
Address:	4700 S. Bowman Rd., Suite 100	<u> </u>
	Little Rock, AR 72210	١ و ١
		王 000
	an:	
Address:		<del>3</del> 5,
Director:		
Address:		
Address:		-
B. OFFIC	EDC	
•		
_	Phil Whisenhunt	
Address:	4700 S. Bowman Road, Suite 100	
<del></del>	Little Rock, AR 72210	
Vice Preside	nt: Todd Williams	
Address:	4700 S. Bowman Road, Suite 100	
	Little_Rock, AR 72210	
Secretary: _		
Address:		
Treasurer:		
Address:		
	the state of the configuration listing additional officers and	or directors.
	necessary, you may attach an addendum to the application listing additional officers and	or university
13. <u>///</u>	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the ag	pplication)
, , , , , , , , , , , , , , , , , , ,	Phil Whisenhunt President  (Typed or printed name and capacity of person signing application)	
14/	(Transfer printed name and canacity of person signing application	1)



#### State of Arkansas SECRETARY OF STATE



## OF A DOMESTIC CORPORATION



I, Sharon Priest, Secretary of State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show:

#### COMMUNICATION MANAGEMENT SPECIALISTS, INC.

a corporation chartered under the laws of the State of Arkansas, filed Articles of Incorporation May 31, 2000.

I further certify that as far as the records show, this corporation is at this time chartered and in good standing, having met all the requirements governing a domestic corporation in this State.

In Testimony Whereof, I have hereunto set my hand and affixed my Official Seal. Done at my office in the City of Little Rock, Arkansas this 6th day of September 2000.

haron Priest, Secretary of State

D E Morrow

C-2/Rev 10-1-88