

F10000002547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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06/02/10--01032--002 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUN -2 PM 3:59

APPROVED
AND
FILED



2600 Maitland Center Pkwy.
Suite 300
Maitland, FL 32751
P.O. Drawer 200
Winter Park, FL
32790-0200
Tel: 407-740-8575
Fax: 407-740-0613
tmi@tminc.com

June 1, 2010
Via Overnight Delivery

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: WiMacTel, Inc.
**Application by Foreign Corporation for Authorization to Transact
Business in Florida**

To Whom This May Concern:

Enclosed, please find the completed and signed **Application by Foreign Corporation for Authorization to Transact Business in Florida** and the required supporting documents submitted on behalf of WiMacTel, Inc. A check in the amount of **\$78.75** is enclosed for the remittance of fees due.

Please acknowledge receipt of this filing by date stamping the extra copy of this application and cover letter and returning both to me in the self addressed stamped envelope provided.

Questions regarding this filing should be addressed to me at 407-740-3035 or via email at pmiller@tminc.com. I thank you for your assistance with this matter.

Sincerely,

Phyllis Miller
Assistant Manager, Compliance Reporting

Cc: James MacKenzie, WiMacTel, Inc.

File: WiMacTel, Inc. – Misc SOS - FL

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: WiMacTel, Inc.

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," or "Certificate of Good Standing" 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:

Phyllis Miller

Name of Person

Technologies Management, Inc.

Firm/Company

2600 Maitland Center Parkway, #300

Address

Maitland, FL 32751

City/State and Zip code

pmiller@tminc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Phyllis Miller

Name of Person

at (407) 740-3035

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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 &
Certificate of Status

☒ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
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.*

1. WIMacTel, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/04/2010 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon issuance of certificate of authority
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1882 Porter Lake Drive, Suite 101, Sarasota, FL 34240
(Principal office address)

1882 Porter Lake Drive, Suite 101, Sarasota, FL 34240
(Current mailing address)

8. telecommunications
(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 NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 2731 Executive Park Drive Suite 4

Weston, , Florida 33331
(City) (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.

NRAI Services, Inc.

by: Lindsey Klemencic
(Registered agent's signature)

Lindsey Klemencic, Assistant Secretary

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.

10 JUN -12 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
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12. Names and business addresses of officers and/or directors:

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AND
FILED

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A. DIRECTORS

Chairman: James MacKenzie

Address: 1882 Porter Lake Drive, Suite 101, Sarasota, FL 34240

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: John Wilson

Address: 1882 Porter Lake Drive, Suite 101, Sarasota, FL 34240

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: James MacKenzie

Address: 1882 Porter Lake Drive, Suite 101, Sarasota, FL 34240

Vice President: _____

Address: _____

Secretary: James MacKenzie

Address: 1882 Porter Lake Drive, Suite 101, Sarasota, FL 34240

Treasurer: James MacKenzie

Address: 1882 Porter Lake Drive, Suite 101, Sarasota, FL 34240

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. James MacKenzie, CEO/President/Secretary/Treasurer

(Typed or printed name and capacity of person signing application)

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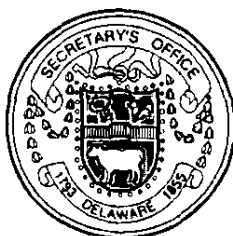
Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WIMACTEL INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF MAY, A.D. 2010.

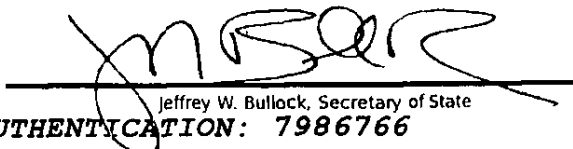
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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



4819548 8300

100492066

You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7986766

DATE: 05-11-10

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