

F190000003601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

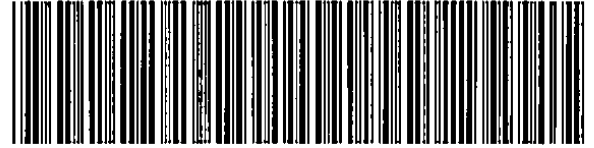
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to _____ Officer: _____

Office Use Only



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PAID
2019 AUG -5 PM 4:40
CLERK

B KINSEY
AUG 06 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2019

MARTIN L PHILLIPS
1540 INTERNATIONAL PARKWAY, STE 2000
LAKE MARY, FL 32746

SUBJECT: SMALL CELL SOLUTIONS, INC
Ref. Number: W19000062608

We have received your document for SMALL CELL SOLUTIONS, 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):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please be specific on which person you want listed as the secretary

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.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 719A00015717



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 8, 2019

MARTIN L PHILLIPS
1540 INTERNATIONAL PARKWAY, STE 2000
LAKE MARY, FL 32746

SUBJECT: SMALL CELL SOLUTIONS, INC
Ref. Number: W19000062608

RECEIVED
19 JUL 31 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FL

We have received your document for SMALL CELL SOLUTIONS, INC and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

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) 245-6842.

Deborah Bruce
Corporate Records Supervisor II

Letter Number: 519A00013725

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. SMALL ELL SOLUTIONS INC.

(Enter name of corporation; names include "INCORPORATED," "COMPANY," "CORPORATION,"
"INC.," "CO.," "CORP.," "LLC," "CO.," or "Corp.")

2. SES INC.

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

3. CALIFORNIA

(State or country under the law of which it is incorporated)

4. 83-4098450

(FEI number, if applicable)

5. 3-30-2019

(Date of incorporation)

6. N/A

(Date of duration, if other than perpetual)

7. Registering July 08, 2019

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

8. 1540 INTERNATIONAL PARKWAY, STE 2000

(Principal office address)

9. LAKE MARY, Florida 32746

(Current mailing address, if different)

10. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

Martin L. Phillips

Office Address:

1540 INTERNATIONAL PARKWAY, STE 2000

LAKE MARY

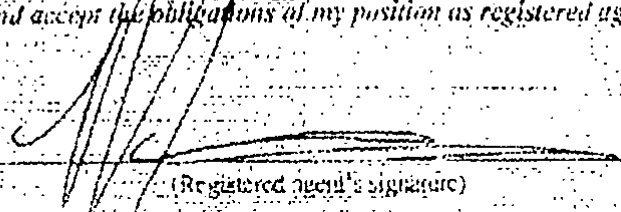
(City)

Florida 32746

(Zip code)

11. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation in 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)

12. 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.

2019 AUG -5 PM 4:40

Page 3 of 3

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Martin L. PhillipsAddress: 2043 Loggia
Newport Beach CA 92660Vice Chairman: N/A

Address: _____

Director: CHASE DAVISAddress: 3579 Lila St
Riverside CA 92504Director: N/A

Address: _____

B. OFFICERS

President: Martin L. PhillipsAddress: 2043 Loggia
Newport Beach CA 92660Vice President: SAME AS ABOVE

Address: _____

Secretary: Martin L. PhillipsAddress: 2043 Loggia, Newport Beach, CA 92660

Treasurer: _____

Address: _____

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

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

13. _____

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

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State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

SMALL CELL SOLUTIONS, INC.

FILE NUMBER: C4254720
FORMATION DATE: 03/20/2019
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

RECEIVED
19 JUL 31 PM 2:41
SECRETARY OF STATE
TALL AMBASSI

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of July 29, 2019.

ALEX PADILLA
Secretary of State