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(((H18000005529 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FOLEY & LARDNER Account Number : 072720000061 : (904)359-2000 Phone Fax Number : (904)359-8700

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: 5 jen Kins @ spectra shield

FLORIDA LIMITED LIABILITY CO. CCI SPECTRUM, LLC

Certificate of Status	0
Certified Copy	1
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JAN 0 9 2018

K. Brumbley

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Corporate Filing Menu

Help



January 5, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FOLEY & LARDNER

SUBJECT: CCI SPECTRUM, LLC

REF: W18000001194

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is V33007.

If you have any further questions concerning your document, please call (850) 245-6052.

KYLE D BRUMBLEY Regulatory Specialist II New Filing Section FAX Aud. #: B18000005529 Letter Number: 018A00000332



ATTORNEYS AT LAW

CNE INDEPENDENT DRIVE, SUITE 1300 JACKSONVILLE, FL 32202-5017 904.359.2000 TEL 904.359.8700 FAX WWW.FDLEY.CCM

WRITER'S DIRECT LINE 904,633,8913 mk/wan@foley.com EMAIL

CLIENT/MATTER NUMBER 026550-0104

January 5, 2018

Via Facsimile: (850) 617-6381

Florida Department of State
Division of Corporations
Attn: Kyle D. Brumbley, Regulatory Specialist II
New Filing Section
P.O. Box 6327
Tallahassee, FL 32314

Re: CCI SPECTRUM, LLC

Reference: W18000001194 Fax Aud. No.: H18000005529 Letter Number: 018A00000332

Dear Mr. Brumbley,

We are in receipt of your letter regarding the inability to file the Articles of Organization of CCI Spectrum, LLC due to its name not being distinguishable from CCI Spectrum, Inc.

CCI Spectrum, LLC, once filed, will have the same principals as CCI Spectrum, Inc. CCI Spectrum, Inc. is the sole member of CCI Spectrum, LLC, which is managed by its sole member. CCI Spectrum, Inc. will be contributing certain assets owned by it to CCI Spectrum, LLC.

Please give me a call at 904-633-8913 should you have any questions or require any additional clarification.

Sincerely,

Michael B. Kirwan

MBK:sb

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Liability	Company is:				
CCI SPECTRUM, LL	<u>C</u>				
(Must contai	n the words "Limited	Liability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address:					
The mailing address and street add	iress of the principal of	office of the Limited	Liability Company is:		
Principal	Office Address:		Mailing Address:		
4527 Sunbeam Road			. Box 57309		
Jacksonville, FL 3225	57	Jack	ssonville, FL 32241		
					
ARTICLE III - Registered Ager	ıt, Registered Office,	& Registered Ago	nt's Signature:	>> (., -	
(The Limited Liability Company of	annot scrve as its own	n Registered Agent.	You must designate an individual		1 0
another business entity with an ac	ctive Florida registration	on.)			3 1
The name and the Florida street as	ddress of the registere	d agent are:			
		_		SES C	φ <u>r</u>
	F & L Corp.			က်ကြော	2 11
		Name		<u>~</u>	
	One Independent Di	rive, Suite 1300		요	ية وي ن
	Florida street addre	ss (P.O. Box <u>NOT</u> s	acceptable)		Ď
	Jacksonville	FL	32202		
	City	State	Zip		

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 dutles, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

By: Charler V. Heller
Registered Agent's Signature (REQUIRED)

Charles V. Hedrick, Authorized Signatory

(CONTINUED)

'it le:	Name and Address:
AMBR" = Authorized Member	
MGR" - Manager	GOI C
MBR	CCI Spectrum, Inc. 4527 Sunbeam Road
	Jacksonville, FL 32257
	Jacksonvine, FC 32257
	
V: Effective date, if other than the date of tive date is listed, the date must be spe	eific and cannot be more than five business days prior to or 90
V: Effective date, if other than the date of tive date is listed, the date must be sper filling.) he date inserted in this block does not ment's effective date on the Department of	eific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
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V: Effective date, if other than the date of tive date is listed, the date must be specifiling.) the date inserted in this block does not ment's effective date on the Department of the CVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a ment is document is executed am aware that any false constitutes a third degree	eet the applicable statutory filing requirements, this date will not if State's records. mber or an authorized representative of a member, ed in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State