| MODOCOODA740 FILING REQUEST | | | | | | |
|---------------------------------------|---|--|--|--|--|--|
| October 14, 2002 | | | | | | |
| FLORIDA SECRETARY OF | STATE | - unisearch — | | | | |
| Type of Filing: | QUALIFICATION | 5000084006159 | | | | |
| Subject(s): | TWIN CITY CAPITAL, LLC | -10/16/0201059002 ****125.00 ****125.00 | | | | |
| Form(s) Enclosed: | APPLICATION BY FOREIGN LLC CERTIFICATE OF DESIGNATIO | - | | | | |
| Supporting Document(s): | CERTIFICATE OF GOOD STAND | DING | | | | |
| Check Enclosed: | CHECK #4040 FOR \$125.00 | NULA ALLA | | | | |
| Retum Via: | REGULAR MAIL - SASE ATTACH | | | | | |
| Filing Method: | ASAP | | | | | |
| | | | | | | |

PLEASE RETURN TO: Unisearch, Inc. 590 Park Street, Suite 6 St. Paul, MN 55103

> Please call me at **1-800-227-1256** if there are any questions. Thank you! Jackie Sorman

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. TWIN CITY CAPITAL, LLC

| (Name of foreign limited liability company) | | | | | |
|--|---|------|---|--|--|
| | Minnesota (Jurisdiction under the law of which foreign limited liability company is organized) 3. 41-2017139 (FEI number, if applicable) | | | | |
| 4. | . June 5, 2001 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to revise or "perpetual") | | | | |
| 6. | Upon qualification | 2 | | | |
| _ | (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) | | | | |
| 7. | 1711 W. County Road B, #330N | | | | |
| | Roseville, MN 55113 | | | | |
| (Street address of principal office) | | | | | |
| 8. | . If limited liability company is a manager-managed company, check here 🗹 | | | | |
| 9. The name and usual business addresses of the managing members or managers are as follows: | | | | | |
| Jon Greene 1711 W. County Road B, Roseville, MN 55113 | | | | | |
| | Leon Oistad 4946 Devonshire Circle, Shorewood, MN 55331 | ,a | | | |
| | James Holmquist 1711 W. County Road B, Roseville, MN 55113 | A . | | | |
| | | | | | |
| | | ·- · | · | | |

- 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
- 11. Nature of business or purposes to be conducted or promoted in Florida: Telecommunication services

÷ -Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Jon Greene

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

 1. The name of the Limited Liability Company is:
 Image: Company is:

 TWIN CITY CAPITAL, LLC
 Image: Company is:

 2. The name and the Florida street address of the registered agent and office are:
 Image: Company is:

 NRAI Services, Inc.
 Image: Company is:

 S26 E. Park Avenue
 Image: Company is:

 Florida street address (P.O. Box NOT ACCEPTABLE)

 Tallahassee
 FL 32301

 (City/State/Zip)

- 1

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. NRAI Services, Inc.

By:

(Signature) Sue Brodtmann, Assistant Secretary

- **\$ 100.00** Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State on the date listed below; the limited liability company is governed by Chapter 322B of Minnesota Statutes; and this limited liability company is authorized to do business as a limited liability company at the time this certificate is issued.

Name: TWIN CITY CAPITAL, LLC Date Formed or Registered: June 5, 2001 State of Organization: Minnesota

This certificate has been issued on October 14, 2002.



Mary Kiffm

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FILED