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(Req	uestor's Name)	<u>. </u>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of Status	
Special Instructions to Fi	ling Officer:	





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SECRETARY OF STATE STATE OF STATE



ACCOUNT NO. : 072100000032
REFERENCE : 939698 5014558
AUTHORIZATION : Totalog to
COST LIMIT : \$ 125.00
ORDER DATE : February 21, 2003
ORDER TIME : 9:43 AM
ORDER NO. : 939698-015
CUSTOMER NO: 5014558
CUSTOMER: Ms. Annette Janda Riffner, Barber, Scott & 1920 North Thoreau Drive Suite 100
Schaumburg, IL 60173
FOREIGN FILINGS FOREIGN FILINGS
NAME: NUWIRELESS, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Darlene Ward EXT#1135
EXAMINER:

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: NuWireless, LLC (Name of foreign limited liability company) (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) Upon authorization (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 27900 CHAGRIN BOULEVARD, WOODMERE, OH 44122 (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: Michael Cairo, 27900 Chagrin Boulevard, Woodmere, OH 44122 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: Sale and service of cellular/wireless telecommu ation products, accessories, and services. re 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.)

Typed or printed name of signee

Michael Cairo

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:	
NUWIRELESS, LLC	
2. The name and the Florida street address of the registered agent and office are:	
CORPORATION SERVICE COMPANY (Name)	
1201 HAYS STREET Florida street address (P.O. Box NOT ACCEPTABLE)	DIVIS 03F
TALLAHASSEE FL 22301 (City/State/Zip)	EB 24 P
Having been named as registered agent and to accept service of process for the above stated lim 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 statutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. (Signature)	of all

\$ 100.00 Filing Fee for Application\$ 25.00 Designation of Registered Agent

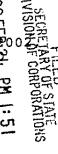
\$ 30.00 Certified Copy (optional)\$ 5.00 Certificate of Status (optional)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that NUMIRELESS, LLC,

HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 03, TAPPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.





In Testimony Whereof, I, hereto set

Desse White