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J. BAWAN OCT 1 9 2004

TRANSMITTAL LETTER

TO: Registration Section Division of Corporati	ons .		
SUBJECT:	Nort	h Pork Networks, LLC	
	(Name of I	Limited Liability Company)	
	ence, and check ar	Liability Company for Authorization to Tre submitted to register the above reference la	
Please return all corresponde	nce concerning th	is matter to the following:	
	SI	tephen K. Boone	يم ين
	((Name of Person)	2004 OCT 18 PH 2: 17
	Boone, Boor	ne, Boone, Koda & Frook, P.A.	7 18 T
	(Firm/Company)		温 里
	10	001 Avenida del Circo	2: 17 FLOR
	(Address)		DA S
		Venice, FL 34285	
	(City	y/State and Zip Code)	_
For further information conce	erning this matter,	please call:	
Steph	en K. Boone	at (941) 488-6716	
(Name	of Person)	(Area Code & Daytime Telephon	e Number)
STREET ADDRESS:		MAILING ADDRESS:	
Registration Section		Registration Section	
Division of Corporations Division of Corporations			
409 E. Gaines Street P.O. Box 6327			
Tallahassee, Florida 3	2399	Tallahassee, Florida 32314	
Enclosed is a check for the fo	llowing amount:		
□ \$125.00 Filing Fee	□ \$130.00 Filing Fee	_	ling Fee, Certificate

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	No (Name of Forei	orth Port Netwo	rks, LLC	
	(Name of Forei	gn Limited Liab	nty Company)	
2.	Delaware	3	75-3159203	
	risdiction under the law of which foreign limit npany is organized)	ed liability	75-3159203 (FEI number, if applicable)	
			<u> </u>	
4	June 14, 2004	5	Perpetual (Duration: Year limited liability company)	3 3
	(Date of Organization)		(Duration: Year limited liability company) exist or "perpetual")	will cease to
		N/A	• • •	H550
6	(Date first transacted hi		, if prior to registration.)	1 1 1 1 1 1 1 1 1 1
	(See sections 608.501 &	608.502 F.S. to	letermine penalty liability)	77. 72
- 64	148 Hollywood Blvd, Suite 500, Sarasota, I	FL 34231		52 -
/. <u>-</u>	. To , to it, to it at a to it at			- 35 -
				75
_	(Sti	eet Address of F	rincipal Office)	
			·	
8. If	limited liability company is a manager	r-managed co	npany, check here 🗌	
9. 11	he name and usual business addresses	of the managi	ng members or managers are as follo	ws:
D	Daniel E. Ezelle, 6448 Hollywood Blvd, Suit	te 500. Saraso	a. FL 34231	
		<u> </u>	<u></u>	 _
F	Rodney V. Hale, 6448 Hollywood Blvd, Sui	te 500, Saraso	a, FL 34231	
_				
_				
	ttached is an original certificate of existence, no n			
	risdiction under the law of which it is organized.			language, a
transla	ation of the certificate under oath of the translator	must be submitte	d.)	
		1 1	and the proof to	
11. 1	Nature of business or purposes to be co	nducted or pr	omoted in Florida:	<u> </u>
	to provide dit	igal broadband	cable services	
		$\frac{1}{2}$	1 0	 •
		M/4	(1) one	
	Signature of a memb	er or an autho	rized representative of a member.	
	(In accordance with section	608.408(3), F.S.,	he execution of this document constitutes	
	an affirmation under the pe	nalties of perjury	hat the facts stated herein are true.)	
		stephen K. Boo	ne	
	Typec	or printed na	me 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 Compar	ny is:	
North Pork	k Networks, LLC	
2. The name and the Florida street address of	f the registered agent and office are:	OCT 18
St	tephen K. Boone, Esq.	Street 3
	(Name)	- F. O. C.
10	001 Avenida del Circo	(S)
Florida Street Addre	ess (P.O. Box <u>NOT</u> ACCEPTABLE)	-
	Venice, FL 34285 City/State/Zip	-
Having been named as registered agent and to liability company at the place designated in this agent and agree to act in this capacity. I furthe relating to the proper and complete performance obligations of my position as registered agent a (Signature)	s certificate, I hereby accept the appointner or agree to comply with the provisions of ce of my duties, and I am familiar with ar	nent as registered all statutes ad accept the

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



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NORTH PORT NETWORKS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF OCTOBER, A.D. 2004.



Warriet Smith Windson Harriet Smith Windson

tarrier simul vymosor, secretary or state

AUTHENTICATION: 3411533

DATE: 10-14-04

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