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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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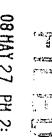
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SECRETARY OF STATE
ALL AHASSEE FLORID.



COVER LETTER

ΓO: Registration Section Division of Corporations
SUBJECT: KPV Enterprises, LLC
(Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited iability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Michael E. Gray
(Name of Person)
KPV Enterprises, LLC
(Firm/Company)
1264 Rocky Hill Road
(Address)
Knoxville, Tennessee 37919
(City/State and Zip Code)
For further information concerning this matter, please call:
Michael E. Gray at (865) 691-6355
(Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigcip\\$125.00 \text{ Filing Fee} \Bigcip\\$130.00 \text{ Filing Fee & Bigcip Fee & Bigcip Fee, Certificate } Certificate of Status Certified Copy of Status & Certified Copy

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:
KPV Enterprises, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Tennessee 3. 62-1734717
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 03/27/98 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1264 Rocky Hill Road 异常 更
Knoxville, Tennessee 37919
(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 E. Gray 1264 Rocky Hill Road, Knoxville, Tennessee 37919
William R. DuPree, III 1264 Rocky Hill Road, Knoxville, Tennessee 37919
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: Own and operate
pay telephones.
Milael E. Man
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.) Michael E. Grav

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:	
KPV Enterp	rises, LLC	
If name unavail	able, the alternate name to be used in the state of Florida is:	
2. The name an	d the Florida street address of the registered agent and office are:	
	Mark Toms	TAS 8
	(Name)	SECULAR ST
	514 Pleasant Grove Drive	22 N
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	Eng P
	Winter Springs, FL 32708 FL	2:50 2:50
	City/State/Zip	4

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, Florida Statutes.

Mark Toms (Signature)

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

Secretary of State **Division of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 05/19/2008 REQUEST NUMBER: 08140121 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 03/27/1998 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL

CONTROL NUMBER: 0348337 JURISDICTION: TENNESSEE

TO: MICHAEL E. GRAY 1264 ROCKY HILL RD KNOXVILLE, TN 37919 REQUESTED BY: MICHAEL E. GRAY 1264 ROCKY HILL RD KNOXVILLE, TN 37919

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "KPV ENTERPRISES, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID:
THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS BEEN FILED;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

KPV ENTERPRISES LLC

1264 ROCKY HILL ROAD

KNOXVILLE, TN 37919-0000

ON DATE: 05/19/08

FEES RECEIVED: \$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00004412113 ACCOUNT NUMBER: 00315176



FROM:

RILEY C. DARNELL SECRETARY OF STATE