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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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1ALLAHASSEE, FLORING

B. KOHR

JUN - 3 2008

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT #FCA-14

ACCT. #FCA-14			0,7
CONTACT:	RICKY SOT	<u>co</u>	OBJUN-3 PM 4: 05
DATE:	06/03/2008		P. I. S.
REF. #:	000173.8795	<u>9</u>	To Bert
CORP. NAME:	INSITE TO	WERS, LLC	7
() ARTICLES OF INC	ORPORATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION
() ANNUAL REPORT		() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME
(XX) FOREIGN QUALIF	FICATION	() LIMITED PARTNERSHIP	() LIMITED LIABILITY
() REINSTATEMENT		() MERGER	() WITHDRAWAL
() CERTIFICATE OF	CANCELLATION		
() OTHER:			
STATE FEES P	REPAID WI	тн снеск# <u>526304</u>	_ FOR \$ <u>125.00</u>
AUTHORIZAT	ION FOR A	CCOUNT IF TO BE DEBIT	ED:
		COST L	IMIT: \$
PLEASE RETU	RN:		
() CERTIFIED COP	Y ()C	ERTIFICATE OF GOOD STANDING	(XX) PLAIN STAMPED COPY
() CERTIFICATE O	F STATUS		

Examiner's Initials

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	STATE OF FLORIDA:
_{I.} InSite Towers, LLC	
(Name of Foreign Limited Liability Company; must include	de "Limited Liability Company," "L.L.C.," or "LLC.")
	<u> </u>
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern	
Company," "L.L.C.," "LLC.")	95
	20-5860132
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
	perpetual 💮 🕏
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Flor	rida, if prior to registration.)
(Date first transacted business in Floi (See sections 608,501 & 608,502 F.S.	to determine penalty liability)
7. 301 N. Fairfax Street, Suite 101	
Alexandria, VA 22314	
(Street Address o	of Principal Office)
8. If limited liability company is a manager-managed	company, check here ✓
9. The name and usual business addresses of the mana	iging members or managers are as follows:
David Weisman, Manager, 301 N. Fairfa	x Street, Suite 101, Alexandria VA 22314
Lance Cawley, Manager, 301 N. Fairfax	x Street, Suite 101, Alexandria VA 22314
Francis Fuson, Manager, 301 N. Fairfax	x Street, Suite 101, Alexandria VA 22314
10. Attached is an original certificate of existence, no more than 90 dithe jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subtraction.)	•
11. Nature of business or purposes to be conducted or	promoted in Florida: own and operate
telecommunication tower facilities	
M	
	thorized representative of a member. S., the execution of this document constitutes ary that the facts stated herein are true)
David Weisman	
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.

nSite Towers, LLC			
If name unavailable, the alternate name to be used in the state of Florida is:			
. The name and	the Florida street address of the registered agent and office are:		
-	NRAI Services, Inc. (Name)		
_	2731 Executive Park Drive, Suite 4 Florida Street Address (P.O. Box NOT ACCEPTABLE)		
_	Weston, FL 33331 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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature) Joan T. Petty, 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)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INSITE TOWERS, 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 SECOND DAY OF JUNE, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INSITE TOWERS, LLC" WAS FORMED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4237956

080653429

You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTICATION: 6629571

DATE: 06-02-08

Varnet Smile Hindson Harriet Smith Windsor, Secretary of State

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