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T. HAMPTON

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EXAMINER

SANDERS PETMECKY WELCH, LLC

3060 MERCER UNIVERSITY DRIVE

SUITE 200

ATLANTA, GEORGIA 30341

TEL: (404) 325-3200 · FL TEL: (850) 279-6886 · FAX: (404) 325-3280

ROBERT J. B. PETMECKY C. WILTON SANDERS STEVEN T. WELCH"

> *AUSO A MEMBER OF THE STATE BAR OF TENNESSEE *AUSO A MUMBER OF THE STATE BAR OF FLORIDA

> > August 21, 2008

<u>VIA FEDERAL EXPRESS STANDARD OVERNIGHT</u> TRACKING NO. 790565097505

The Honorable Kurt S. Browning Secretary of State of Florida Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

> Re: Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for VerticalCom, LLC, a Wyoming limited liability company

Dear Secretary Browning:

Please find enclosed herein for filing an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for the above-referenced limited liability company together with a Certificate of Designation of Registered Agent/Registered Office. We have also included a Certificate of Good Standing from the organizing jurisdiction and check in the amount of \$155.00 for the fees associated with this filing and your return to us of a Certified Copy thereof. Once you have accepted the original for filing in the office, please return the Certified Copy to our office in the self-addressed, fees prepaid transmittal envelope provided for your convenience.

Please contact Mary Ellen in our office should you require anything further.

Yours Very Truly,

Sanders Petmecky Welch LLC

STEVEN T. WELCH, FOR THE FIRM

STW/dep

Enclosures as stated

Cc: File - Firm Matter No. 08-0061

Wayne A. Ritenour Jr. (via USPS First Class Mail w/o Enclosures)

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

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG. V

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1 VerticalCom, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liab Company," "L.L.C.," "LLC.")	_ e writte ility
2. Wyoming 3. 90-0386323	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	_
4. 04/16/2008 5. Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	_
7. 2 Southminster Ct	_
Niceville, Florida 32578	T]
(Street Address of Principal Office)	F
8. If limited liability company is a manager-managed company, check here \(\sum_{\overline{\chi}} \sum_{\overline{\overline{\chi}}} \sum_{\overline{\chi}} \sum	LED
9. The name and usual business addresses of the managing members or managers are as follows:	
Wayne A. Ritenour, Jr.	_
2 Southminster Ct	_
Niceville, Florida 32578	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rethe 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.)	cords in
11. Nature of business or purposes to be conducted or promoted in Florida: any and all purposes	_
authorized by law.	
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.)	
Wayne A. Ritenour, Jr.	

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 Liab	ility Compa	any is:		
VerticalCom, LLC					
If name unava	ailable, the alternate	e name to be	e used in the state of Florida is:		
2. The name	and the Florida stre	et address o	of the registered agent and office are:		
	Wayne A. Rit	enour, Jr.			
			(Name)	_	
	2 Southminste	er Ct			
	Florid	da Street Addr	ress (P.O. Box NOT ACCEPTABLE)	_	
	Niceville,		FL 32578		
			City/State/Zip	_	
liability compa agent and agra relating to the	any at the place desi ee to act in this capo proper and comple	ignated in th acity. I fyrth te performar	o accept service of process for the above his certificate, I hereby accept the appoint her agree to comply with the provisions o ince of my duties, and I am familiar with a as provided for in Chapter 608, Florida	tment as registered f all statutes and accept the	
	•	\$ 100.00 \$ 25.00	Filing Fee for Application Designation of Registered Agent	AUG 2 RETAR AHASS	

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

VerticalCom, LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 16, 2008**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2008-000553479**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 15th day of August, 2008 at 4:15 PM. This certificate is assigned 003573623.



Mas Massile
Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.