

M09000001062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

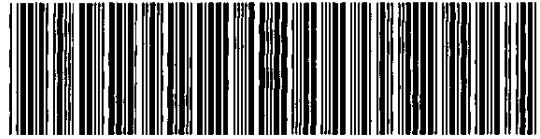
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800144363338

02/25/09--01022--004 **155.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR 17 PM 2:38

T. HAMPTON

MAR 18 2009

EXAMINER

4226-6011

Lance J.M. Steinhart, P.C.

Attorney At Law
1720 Windward Concourse
Suite 115
Alpharetta, Georgia 30005

Also Admitted in New York
and Maryland

Telephone: (770) 232-9200
Facsimile: (770) 232-9208
Email: lsteinhart@telecomcounsel.com

February 24, 2009

VIA FEDERAL EXPRESS

Qualification/Tax Lien Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301
(850) 245-6051

Re: Certificate of Authority for Conexions LLC

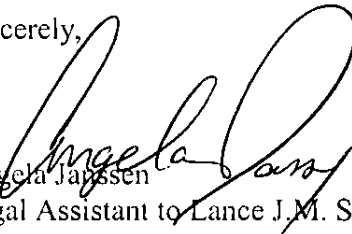
Dear Sir/Madam:

In connection with the above-referenced matter, enclosed please find the following documents:

1. One original and one copy of the Application for Certificate of Authority of a Foreign Limited Liability Company;
2. One Certificate of Good Standing issued by the Tennessee Secretary of State; and
3. A check in the amount of \$155.00 payable to the Florida Department of State in payment of the filing fee and the issuance of the Certificate of Authority.

When the application is accepted for filing, please forward in the overnight package enclosed.

Sincerely,



Angela Janssen
Legal Assistant to Lance J.M. Steinhart, P.C.

Enclosures

cc: Brian Cox (w/enc)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 MAR 17 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 26, 2009

ANGELA JANSSEN, LEGAL ASSISTANT

1720 WINDWARD CONCOURSE - STE 115
ALPHARETTA, GA 30005

SUBJECT: CONEXIONS LLC
Ref. Number: W09000009236

We have received your document for CONEXIONS LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The document number of the name conflict is P95000071164 (CONEXION, INC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton

Regulatory Specialist II
Registration/Qualification Section

Letter Number: 909A00006753

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of CONEXIONS LLC,
(Name of Limited Liability Company)

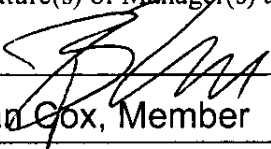
a limited liability company duly organized and existing under the laws of
Tennessee
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:

Conexion Wireless, LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability
Company, L.L.C., or LLC.)

Date: 3/13/09

Signature(s) of Manager(s) and/or Managing Member(s):

 _____ Brian Cox, Member	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. **CONEXIONS LLC**

(Name of foreign limited liability company)

2. **Tennessee**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **20-8566470**

(FEI number, if applicable)

4. **February 16, 2007**

(Date of Organization)

5. **Perpetual**

(Duration: Year limited liability company will cease to exist or "perpetual")

6. **upon qualification**

(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. **11121 Highway 70; Ste. 202, Arlington, TN 38002**

(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The usual business addresses of the managing members or managers are as follows:

11121 Highway 70; Ste. 202, Arlington, TN 38002

See Attached

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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: _____

Provide Telecommunication Services

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.)

Brian Cox

Member

Typed or printed name of signee

LIST OF MEMBERS & DIRECTORS OF
Conexions LLC

Members

Brian Cox - mGRm
Chris Watson - mGRm

Directors

None

All the above referenced Members/Managers & Directors can be reached at:
11121 Highway 70, Suite 202, Arlington, TN 38002-9230

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**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:

CONEXIONS LLC

2. The name and the Florida street address of the registered agent and office are:

Incorp Services, Inc.

(Name)

17888 67th Court North

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Loxahatchee

FL 33470

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, F.S..

Chen Jiahua on behalf of Incorp Services, Inc.
(Signature)

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

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Secretary of State
Division of Business Services
312 Rosa L. Parks Avenue
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 02/11/2009
REQUEST NUMBER: 09042519
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 02/16/2007
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0541669
JURISDICTION: TENNESSEE

TO:
RTC-CIS, LLC %SHERRY GALE
450 OLD PEACHTREE RD
NW STE 101A
SUWANEE, GA 30024

REQUESTED BY:
RTC-CIS, LLC %SHERRY GALE
450 OLD PEACHTREE RD
NW STE 101A
SUWANEE, GA 30024

CERTIFICATE OF EXISTENCE

I, TRE HARGETT, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"CONEXIONS 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

ON DATE: 02/11/09

FROM:
RTC-CIS, LLC
450 OLD PEACHTREE RD
NW 101A
SUWANEE, GA 30024-7289

RECEIVED: FEES \$40.00 \$0.00
TOTAL PAYMENT RECEIVED: \$40.00

RECEIPT NUMBER: 00004529581
ACCOUNT NUMBER: 00606778



Tre Hargett

TRE HARGETT
SECRETARY OF STATE