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SEURE LARY OF STATE

COVER LETTER

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TO: Registration Section Division of Corporations

SUBJECT: Fulton Communications of F (Name of Limit	lorida, LLC ed Liability Company)
The enclosed "Application by Foreign Limited Liab Florida," Certificate of Existence, and check are sub liability company to transact business in Florida	ility Company for Authorization to Transact Business in omitted to register the above referenced foreign limited
Please return all correspondence concerning this ma	tter to the following:
Lee B. Beitchman	
(Nam	ne of Person)
Beitchman & Hudson, LLP	
(Firm	n/Company)
215 14th St., NW	
,	Address)
Atlanta, GA 30318	
(City/Stat	te and Zip Code)
For further information concerning this matter, please	se call:
Lee B. Beitchman	at (404) 897-5252
(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: \$\sum \\$125.00 \text{ Filing Fee} \sum \\$\sum \\$130.00 \text{ Filing Fee & Certificate of S}	\$155.00 Filing Fee & \$\bigcup\$\$160.00 Filing Fee, Certificate 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:	2010121	71 1 ONLEGI
1. Fulton Communications of Florida, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of the company of t		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of	or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attaconsent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C.," "LLC.")	h a copy o	f the written
2. Georgia (Jurisdiction under the law of which foreign limited liability) 3. (FEI number, if applicable)	ති	
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)	
4. <u>02/02/2009</u> 5. perpetual		
(Date of Organization) (Duration: Year limited liability companexist or "perpetual")	y will ceas	e to
6(Date first transacted business in Florida, if prior to registration.)		
(See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. 3146 Reps Miller Road		
Norcross, Georgia 30071		
(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 fo	llows:	
Ben Treadway, 3146 Reps Miller Road, Norcross, GA 30071		
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a forestranslation of the certificate under oath of the translator must be submitted.)		
11. Nature of business or purposes to be conducted or promoted in Florida: operation	of a	
telecommunications hardware and software distribution company	-1	
S Aug	יבר! פבני:	MH 60
Signature of a member of an authorized representative of a member.	- L 1 - L 1	· 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元 元
(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.)	∃SS XXX	F
Ben Treadway	ini _{Cr}	
Typed or printed name of signee	101 118	œ Ο

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:			
Fulton Communications of Florida, LLC	·		
If name unavailable, the alternate name to be used in the state of Florida is:			
2. The name and the Florida street address of the registered agent and office are:			
Kerry E. Kelly			
(Name)	,		
219 Robin Road			
Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Altamonte Springs, Florida 32701 FL	_		
City/State/Zip			
Having been named as registered agent and to accept service of process for the above stability company at the place designated in this certificate, I hereby accept the appointing agent and agree to act in this capacity. I further agree to comply with the provisions of a relating to the proper and complete performance of my duties, and I am familiar with an obligations of my position as registered agent as provided for in Chapter 608, Florida Stability (1997).	nent as reg all statute id accept i	gistere es the	ď
(Signature)	SECRETARY ALLAHASSE	09 MAR 24	pan
\$ 100.00 Filing Fee for Application			

\$ 25.00 Designation of Registered Agent

Certified Copy (optional) 5.00 Certificate of Status (optional)

\$ 30.00

Control No. 09007617

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE **OF EXISTENCE**

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

FULTON COMMUNICATIONS OF FLORIDA, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 02/02/2009 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 19th day of March, 2009

> Faun CHandel Karen C Handel

> > Secretary of State

Certification Number: 3872677-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp