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SECRETARY OF STATE
ANALYSEE, FLORIDA

T. CLINE

MAR - 3 2010

**EXAMINER** 

#### **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	CT:Cable TNT, LLC
	Name of Limited Liability Company
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please	eturn all correspondence concerning this matter to the following:
	Ms. Terry Scaglione
	Name of Person
	Registered Agents Legal Services, LLc
	Firm/Company
	1220 N. Market Street. Suite 806
	Address
	1220 N. Market Street. Suite 806  Address  Wilmington, DE 19801  City/State and Zip Code  patti@tntdsg.com  E-mail address: (to be used for future annual report notification)
	City/State and Zip Code
	patti@tntdsg.com
	E-mail address: (to be used for future annual report notification)
For fur	her information concerning this matter, please call:
	Ms. Terry Scaglione at ( 800 ) 400-6650
	Name of Person Area Code & Daytime Telephone Number
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclos	ed is a check for the following amount:
	\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate 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: Cable TNT, 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.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 7/1/2004 perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 11500 NW Freeway, Ste. 588 Houston, TX 77092 (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: 11500 NW Freeway, Ste. 588, Houston, TX 77092 Todd LeCompte, Member 11500 NW Freeway, Ste. 588, Houston, TX 77092 Patricia LeCompte, member 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: Direct sales company for the cable industry 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.) 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:		
Cable TNT, LLC		
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:	2010 MAR -2 SECRETARY TALLAHASSE	
Registered Agents Legal Services, LLC	AET 55	
(Name)	-2	
155 Office Plaza Drive, Suite A	- ES =	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	AN II: 09 OF STATE EE, FLORIDA	
Tallahassee FL 32301		
City/State/Zip		
Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the appoint agent and agree to act in this capacity. I further agree to comply with the provisions of relating to the proper and complete performance of my duties, and I am familiar with a obligations of my position as registered agent as provided for in Chapter 608, Florida (Signature)	tment as registere of all statutes and accept the	ed .

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

-Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



### Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for Cable TNT, LLC (file number 800360279), a Domestic Limited Liability Company (LLC), was filed in this office on July 01, 2004.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 25, 2010.



Hope Andrade Secretary of State