#M110000002677

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



700207921917

05/24/11--01011--025 **125.00

FILED

11 HAY 24 PM 2: 32

SEVERI AND OF STATE
ORID

EXAMINER
MAY 25 2011

COVER LETTER

TO:	Registration Se Division of Co				
SUBJI	ECT: SwiftRea	ch 800 Services, LL			
			Name of Limited Liability Company		
			ciability Company for Authorization to Transact Business in Florida," Certificate of e above referenced foreign limited liability company to transact business in Florida		
Please	return all correspondent	ondence concerning this	matter to the following:		
	Carol	ine Pays			
			Name of Person		
	Nowa	ılsky, Bronston & Go			
			Firm/Company		
	1420 Veterans Memorial Blvd.				
			Address		
	Metai	rie, LA 70005			
			City/State and Zip Code		
	cpays	@nbglaw.com	· ·		
		E-mail address	s: (to be used for future annual report notification)		
For fur	ther information of	concerning this matter, p	lease call:		
	Caroline Pays		at (504) 832-1984 Area Code & Daytime Telephone Number		
		Name of Person	Area Code & Daytime Telephone Number		
	MAILING AD Division of Cor Registration Sec P.O. Box 6327 Tallahassee, FL	porations ction	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	sed is a check t ₹\$125.00 Filing I	for the following ame Fee \$\int\$	Fee & \$\infty\$\$ \$155.00 Filing Fee & \$\infty\$\$ \$160.00 Filing Fee, Certificate		

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 HIMTED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF ELORIDA.

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. SwiftReach 800 Services, 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 writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. New Jersey 3 273796294
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 10/22/10 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 31 Industrial Ave., Mahwah, NJ 07430
(Street Address of Principal Office)
(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 🚾 🦰 🦠
Kevin Alward, 31 Industrial Ave., Mahwah, NJ 07430
Jeff Alward, 31 Industrial Ave., Mahwah, NJ 07430
Nancy Jeanne Alward, 31 Industrial Ave., Mahwah, NJ 07430
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:
sale of telecommunication services
Thun Almix
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Marie Advance

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.

SwiftReach 800 Services, LLC					
f unavailable, the	e alternate to be used in	the state of Florida is:			
. The name and	the Florida street address	ss of the registered agent and office are	<u> </u>		
c	Corporation Service Com	pany			
_		(Name)			
1:	201 Hays Street				
-	Florida Street A	Address (P.O. Box NOT ACCEPTABLE)			
<u>.</u>	Γallahassee	FL 32301			
		City/State/Zip			

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)

Dona L. Priebe, Assistant VP

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY SHORT FORM STANDING

SWIFTREACH 800 SERVICES, LIMITED LIABILITY COMPANY

0600365747

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on October 22, 2010.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Corporation Service Company 830 Bear Tavern Road West Trenton, NJ 08628

CREAT SEA THE SEA THE

Certification# 120495137

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 19th day of May, 2011

6.0

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp