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EXAMINER



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DIVISION OF CORPORALIONS

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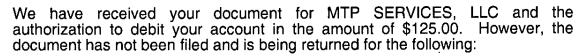


#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 23, 2011

STEPHANIE MILNES CSC TALLAHASSEE, FL

SUBJECT: MTP SERVICES, LLC Ref. Number: W11000059454



In Item 9, please list the NAMES and ADDRESSES of the company's MANAGERS or MANAGING MEMBERS.

Please return 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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 111A00026546





## Please give original submission date as file date.

ACCOUNT NO.	Α	C	CC	<b>UN</b>	T	NO	
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ORDER DATE: November 18, 2011 5:19 PM ORDER TIME : ORDER NO. : 986403-005

CUSTOMER NO: 7611923

#### FOREIGN FILINGS

NAME:

MTP SERVICES, LLC

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PLEASE 1	RETURN	THE FO	LLOWING	AS	PROOF	OF	FILING:	
XX	<del>-</del> -	STAMPE	PY D COPY OF GOOD		MDING			
CONTACT	PERSON	: Ste	phanie	Milr	ies	EXT	# 2920	

**EXAMINER:** 

### COVER LETTER

TO: Registration Section Division of Corporations	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
SUBJECT:	B
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Fl Existence, and check are submitted to register the above referenced foreign limited liability company to transact	lorida," Certificate of ot business in Florida
Please return all correspondence concerning this matter to the following:	
Todd Bolton Name of Person	
MTP Saculces IIC Firm/Company	
6655 First Park Ten Blod. Suite	222
San Antonio, TX 78213 City/State and Zip Code	<del></del>
TBalta address: (to be used for future annual report notification)	$\overline{D}$
For further information concerning this matter, please call:	
Todd Bolton at (210) U96-737	<u> </u>
MAILING ADDRESS:  Division of Corporations  Registration Section  P.O. Box 6327  Tallahassee, FL 32314  STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301	
Enclosed is a check for the following amount:  [ \$125.00 Filing Fee	

### 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

	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  MTP Services, LLC	
٠.,	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
cor	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written assent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C," "LLC.")	
(	Texas  (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) (FEI number)	
4.	(Date of Organization)  (Date of Organization)  5. (Duration: Year limited liability company will cease to exist or "perpetual")	· ) • • • • • • • • • • • • • • • • • •
6.	(Date first transacted business in Florida, if prior to registration.)	10 A.S.
7.	6655 First Park Ten Blod, Suite 220 2	T VI TONS
8.	(Street Address of Principal Office)  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:	•
	6655 First Port Ten, Suite 222	
the trai	Attached is an original cartificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A pholocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.)	
11	Nature of business or purposes to be conducted or promoted in Florida:	
	Signature of a member of 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.)  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 Comp	any is:
MTP Services, LL	С	
If unavailable, the	alternate to be used in the	e state of Florida is:
2. The name and the	ne Florida street address	of the registered agent and office are:
Cor	rporation Service Compa	ny
		(Name)
120	1 Hays Street	
	Florida Street Add	ress (P.O. Box <u>NOT</u> ACCEPTABLE)
Ta	llahassee	FL 32301 City/State/Zip
liability company at	the place designated in th	o accept service of process for the above stated limited nis certificate, I hereby accept the appointment as registered her agree to comply with the provisions of all statutes
relating to the prope	r and complete performa	nce of my duties, and I am familiar with and accept the
	sition as registered agent oration Service Compan	as provided for in Chapter 608, Florida Statutes.
By:	HITTONE V 10 (Signa	nes, Assistant VP (ure)
	\$ 100.00 \$ 25.00	Filing Fee for Application  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



Hope Andrade Secretary of State

### 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 MTP Services, LLC (file number 800548366), a Domestic Limited Liability Company (LLC), was filed in this office on September 21, 2005.

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 November 21, 2011.



Hope Andrade Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 397968370005