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COVER LETTER

	istration Section ision of Corporations	
SUBJECT:	PLATINUMTEL COM	
	N	ame of Limited Liability Company
		ability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida
Please return	all correspondence concerning this r	natter to the following:
	OMAR AHMAD	
		Name of Person
	PLATINUMTEL COMMU	JNICATIONS, LLC
		Firm/Company
	8108 S. ROBERTS RE	
		Address
	JUSTICE, IL 60458	
		City/State and Zip Code
	raed.najjar@ptel.con	า
	E-mail address:	(to be used for future annual report notification)
For further in	formation concerning this matter, ple	ease call:
RA	ED NAJJAR	at (708) 458-9999 x7216
	Name of Person	Area Code & Daytime Telephone Number
Div	ILING ADDRESS: ision of Corporations	STREET ADDRESS: Division of Corporations
_	istration Section Box 6327	Registration Section Clifton Building
	ahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is	s a check for the following amo 5.00 Filing Fee \$130.00 Filing I Certificate of St	Fee & \$\int\\$155.00\text{ Filing Fee & \$\int\\$160.00\text{ 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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. PLATINUMTEL COMMUNICATIONS, 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 writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	ten					
2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. 36-4468516 (FEI number, if applicable)						
4. 09/07/2001 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")						
6. N/A (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)						
7. 8108 S. ROBERTS RD						
JUSTICE, IL 60458 (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:						
OMAR AHMAD 8108 S. ROBERTS RD JUSTICE, IL 60458						
SULEIMAN ABUEID 8108 S. ROBERTS RD JUSTICE, IL 60458						
OMAR AQEL 8108 S. ROBERTS RD JUSTICE, IL 60458						
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:						
Signature of a member or an authorized representative of a member. (In accordance with section 608 408(2) E.S. the avecation of this downstance are off-matical and the section 408 408(2).						
(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 \$ 817.155, F.S.)						

Typed or printed name of signee

OMAR AHMAD

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:		
PLATINUMTEL COMMUNICATIONS, 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:	12 FE SEUN TALLI	
INCORP SERVICES, INC.	E 80	$\overline{\eta}$
(Name)	_ \$ ²	=
17888 67TH COURT NORTH Florida Street Address (P.O. Box NOT ACCEPTABLE)	MID: 43 FEE, FLORID	ED
Fiorida Street Address (1.O. Box HOT Acces (Antes)	REAL TO	
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 forms position as registered agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

Services, Inc.

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PLATINUMTEL COMMUNICATIONS, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF DECEMBER, A.D.

2011.

3434064 8300

111273072

AUTHENTICATION: 9236731

DATE: 12-17-11

You may verify this certificate online at corp.delaware.gov/authver.shtml