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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE
ALLAMASSEE, FLORIDA

D. BRUCE

NOV 0 6 2012

**EXAMINER** 



October 30, 2012

Division of Corporations
Florida Department of State
Clifton Building
P.O. Box 6327
Tallahassee, FL 32314

RE:

True Wireless, LLC

Dear Filing Officer:

Please file the attached Foreign LLC Registration for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,

Victor Alfano ( Vice President

Encl.

SECRETARY OF STATE

### - 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: True Wireless, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") (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.") 2. Texas 3 26-2897998 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4 07/08/2008 5. perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 6. Upon filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 3124 Brother Blvd. #104, Bartlett, TN 38133 (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 follow Brian Cox, Member, 3124 Brother Blvd. #104, Bartlett, TN 38133 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: wireless telecommunications carrier serving the telephone needs of consumers 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.) Brian Cox, Member

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:	
True Wireless, 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:	_
NRAI Services, Inc.	
(Name)	
515 East Park Avenue	SF 🔀
Florida Street Address (P.O. Box NOT ACCEPTABLE)	AON.
Tallahassee FL 32301	<u> </u>
City/State/Zip	P 3
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 of my position as registered agent as provided for in Chapter 608, Florida Statutes.  NRAI Services, Inc.  By:  (Signature)  Victor Alfano, Assistant Secretary	stered
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	
\$ 30.00 Certified Copy (optional)  \$ 5.00 Certificate of Status (optional)	



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, Certificate of Formation for TRUE Wireless, LLC (file number 801001360), a Domestic Limited Liability Company (LLC), was filed in this office on July 08, 2008.

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 October 01, 2012.



Hope Andrade Secretary of State