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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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15/5 6) 70760-EKW

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: AXECOM Telecom, LLC
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Dan morris-Atkins
Name of Person
AXECOM Telecom LLC
Firm/Company
9191 RG Skinner Parkway #102
Address
Jacksonville, Fl 32256
City/State and Zip code
pan.morris a 4 axecom.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (UH) LOID - 4311 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Clifton Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & Certificate of Status □ \$78.75 Filing Fee & Certified Copy □ \$87.50 Filing Fee, Certified Copy



February 21, 2013

PAM MORRIS-ATKINS 9191 RG SKINNER PKWY #102 JACKSONVILLE, FL 32256

SUBJECT: AXECOM TELECOM, LLC

Ref. Number: W13000010760



We have received your document for AXECOM TELECOM, LLC and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 113A00004303



CR2E027 (9/10)

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AXECOM Telecom, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Pam Morris-Atkins
AXECOM Telecom, LLC Firm/Company
9191 RG SKINNER PKWY # 102
Jacksonville, FL 32256 City/State and Zip Code
E-mail address: (to be beed for future annual report notification)
For further information concerning this matter, please call:
Pam Morris- Atkins at 1014 010 - 4311 Name of Person Area Code & Daytime Telephone Number
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: \$\Begin{array}{c} \\$125.00 \text{ 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:
1 AXECOM Telecom. 110
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
- AXECOM Communications
(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. State of OH10 (Jurisdiction under the law of which foreign limited liability company is organized) 3. U5-47 (0 25 37 57 57 57 57 57 57 57 57 57 57 57 57 57
4. 126 2007 (Date of Organization) 5. Per Detucal (Duration: Year limited liability company will cease to exist or "perpetual")
6. Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
2. 9191 RG Skinner Parkway #-102
Jacksonville, FL 32256 (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:
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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: telecomunications
- Doll
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.)
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:
AXECOM Telecom, LLC
If unavailable, the alternate to be used in the state of Florida is: AXECOM Communications
2. The name and the Florida street address of the registered agent and office are:
James J. Arkins
9191 R.G. SKINNET PKWY #102 Florida Street Address (P.O. Box NOT ACCEPTABLE)
Jacksonville FL 32256 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 of my position as registered agent as provided for in Chapter 608, Florida Statutes. (Signature)
((S.E)
\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show AXECOM TELECOM LLC, an Ohio Limited Liability Company, Registration No. 1675822, was organized within the State of Ohio on January 26, 2007, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 6th day of February, A.D. 2013.

Ohio Secretary of State

Validation Number: 201303700061