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2013 APR -3 AM 8: 40

J. SAULSBERRY EXAMINER APR 4 2013 CR2E027 (9/10)

COVER LETTER

Division of Corporations	•				
SUBJECT: Allirake M	Name of Lim	ervices, LLC			
The enclosed "Application by For Existence, and check are submitte	eign Limited Liability Com d to register the above refer	pany for Authorization to Treenced foreign limited liability	ansact Business in Floric y company to transact bu	da," Certif usiness in	icate of Florida
Please return all correspondence of	concerning this matter to the	following:			
	Jim Robin	150N			
	Nε	ame of Person			
·	Alliance -	MONACEMENT S	services, LLC		
	11008 Dec	Address	A CA	2013 APR	-17
	Louisulle	Ky 40299 ate and Zip Code	5 (2) 5 (2) 5 (2) 5 (2) 5 (2) 6 (2)	ြယ်	
		O AllINNCE - SC for future annual report noti	S.com	AM 8: 40	C
For further information concerning	g this matter, please call:		•		
Jim Robins	of Person Area	at (502) 240 Code & Daytime Telephone	-5729 e Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Ex	cT ADDRESS: n of Corporations ation Section Building Recutive Center Circle ssee, FL 32301			
Enclosed is a check for the formula \$125.00 Filing Fee	ollowing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee,		:e

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: Alliance Management Services, LLC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Alliance Manage ment Services "Ky", LLC
(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. Kentucky
(Jurisdiction under thellaw of which foreign limited liability

3. 27 - 103 6422
(FEI number, if applicable) 4. 9/28/2009
(Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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 oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Lowroll Krouding poir + Labor Services on Telecommunication Towers

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.)

RNG RN6/NIVO 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:		
Alliance Management Services, LLC		-
If unavailable, the alternate to be used in the state of Florida is: AlliAnce MANAGement Services "KY", LLC		_
2. The name and the Florida street address of the registered agent and office are: CT Corporation (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)	2013 APR -3 AM 8º 40 SELEMAY OF STATE MALLANASSITE, FLORUBA	
Plantation, FL 33724 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.

Kristin Bolden - Asst. Secretary
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing		
Members of Alliance Management Services, LLC, (Name of Limited Liability Company)		
a limited liability company duly organized and existing under the laws of		
(State or Country of Organization)		
Because the name of this foreign limited liability company does not satisfy the		
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the		
following name to transact business in the state of Florida:		
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)	2013 APR -3	-1
Date: $3/29/13$	ک ن	
Signature(s) of Manager(s) and/or Managing Member(s):	AM 83	1
Keith Burchett Gulle Sunt	0	

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 136326

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

Alliance Management Services LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is September 28, 2009 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 6th day of March, 2013, in the 221st year of the Commonwealth.

JACK -3 AM 8: 40

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Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

136326/0744586

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

0744586

Alison Lundergan Grimes KY Secretary of State Received and Filed

3/22/2013 11:34:49 AM Fee receipt: \$15.00

Alison Lundergan Grimes Secretary of State P. O. Box 1150 Frankfort, KY 40602-1150 (502) 564-3490 http://www.sos.ky.gov

Annual Report Online Filing

ARP

LARP

Company: Alliance Management Services LLC Company ID: 0744586 State of origin: Kentucky 9/28/2009 11:05:49 AM Formation date: Date filed: 3/22/2013 11:34:49 AM Fee: **Principal Office** 11008 DECIMAL DRIVE LOUISVILLE, KY 40299 Registered Agent Name/Address RAY RAGLAND 1796 OWENSBORO ROAD LEITCHFIELD, KY 42754 Members/Managers Member Ray Ragland 1796 Owensboro Road, Leitchfield, KY-42754 Member Keith Burchett 198 St Carol Malone Blvd, Grayson, KY 4/1/43 Signatures Signature Jim Robinson Title Business Administrator