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PICK-UP	☐ WAIT	MAIL			
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Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
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TO ACKROWLEDGE

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W13-44735

'AUG 15 2013 D. BRUCE



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 12, 2013

CORPDIRECT

SUBJECT: NETSOLVER SOLUTIONS LLC

Ref. Number: W13000044735

PLEASE GIVE ORIGINAL SUBMISSION

PLEASE DATE AS FILE DATE

PLEASE DATE

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PLEASE DATE

We have received your document for NETSOLVER SOLUTIONS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

lf you have any questions concerning the filing of your document, please ସ୍ଥୋତି (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 713A00019200

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CORPDIRECT AGES 515 EAST PARK AVI TALLAHASSEE, FL 222-1173	ENUE	nerly CCRS)				•
FILING COVER S ACCT. #FCA-23	SHEET					
CONTACT:	Kim Weiden	<u>bach</u>				
DATE:	08/09/13					
REF. #:	8859539					
CORP. NAME:	NETSOLVE	R SOLUTIONS LLC				
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() CERTIFICATE OF	STATUS					

Examiner's Initials

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: NetSolver Solutions 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 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 Delaware (furtisdiction under the law of which foreign limited liability (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 07-17-2013 5. Perpetual
4. O7-17-2013 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. not applicable
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1384 Thatch Palm Drive
Boca Raton, FL 33432
(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: 🛱 💆
Roxanne S Rosetto
1384 Thatch Palm Drive
Boca Raton, FL 33432
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: Internet services
1 - 1
Contract of the second of the
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

Roxanne S Rosetto

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.

	f the Limited Liability Comper Solutions LLC	•	
If unavailable, t	the alternate to be used in th	e state of Florida is:	
2. The name an	nd the Florida street address	of the registered agent and office are:	2013 AUG
	NRAI Services,	Inc.	G-9
		(Name)	
1200 South Pine Island Road			F.O. 10
	Florida Street Ad	dress (P.O. Box NOT ACCEPTABLE)	9: 55 ORNO2
	Plantation	FL 33324	<i>-</i>
		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.

(Signiture) Michele Holden, Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

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

DELAWARE, DO HEREBY CERTIFY "NETSOLVER SOLUTIONS, 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 NINTH DAY OF AUGUST, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NETSOLVER SOLUTIONS, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5369009 8300

130974871

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 0654693

DATE: 08-09-13

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