Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H14000041759 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone Fax Number : (850)222-1092 : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. >

Email Address:

Foreign Limited Liability Company SP FIBER TECHNOLOGIES SOUTHEAST, LLC

Certificate of Status	0
Certified Copy	0
Page Count	08 G
Estimated Charge	\$ 902,50

B. BOSTICK

FEB 2 4 2014

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

dale of submission

	COVER LETTER	
TO: Registration Section Division of Corporations		
SUBJECT: SP Fiber Technologies Sc	outheast, LLC	
300000011	Name of Limited Liability Company	—
The enclosed "Application by Foreign I Existence, and check are submitted to re Please return all correspondence concer	Limited Liability Company for Authorization to Transact Business in Florid egister the above referenced foreign limited liability company to transact bu ming this matter to the following:	ia," Certificate of usiness in Florida
Cammie Duery		•
	Name of Person	
Jones Day		_
	Firm/Company	_
1420 Peachiree Street	Suite #800	, -
	Address	
Atlanta, GA 30309		_
	City/State and Zip Code	
	mail address: (to be used for future annual report notification)	
For further information concerning this r	matter, please call:	
		2014
	at()	
Name of Contr	act 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	20 A 9 3.
	ring amount: 30.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, ertificate of Status Certified Copy of Status & Certifie	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SP Fiber Technologies Southeast, LLC		-
(Name of Pareign 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. The alternate name to Liability Company," "[.L.C," or "LLC.")	ast include "Li	 mited
2. Delaware (Furisdiction under the law of which foreign limited liability company is organized) (Fill number, if applicable)		· -
4. 09/01/2012 (Date first transacted business in Ploids, If prior to registration.) (See sections 603.0904 & 603.0905, F.S. to determine penalty liability)		-
5. 709 Papermill Road		_
Dublin, GA 31027		~
(Street Address of Principal Office) 6. 709 Papermill Road		
Dublin, GA 31027		_
(Mailing Address)	5-92	~ 근
7. The name, title or capacity and address of the person(s) who has/have authority to manag	e is/are:	
Allen Byrd, Sole Hanager		-2
709 Papermill Road, Dublin, GA 31027		
	177	_ <9
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticate having custody of records in the jurisdiction under the law of which it is organized. (A photo acceptable, If the certificate is in a foreign language, a translation of the certificate under oath must be submitted)	copy is not	
Signature of an authorized person (in accordance with section 603.0203, F.S., the execution of this document contributed in affirmation under the penalties of perjusy that the an authorized information subsalited in a document to the Department of Siale constitutes a third degree from as provided for it		
Allen Byrd		
Typed or printed name of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailable, the alternate to be used in the state of Florida is:					
. The name a	nd the Florida street address	s of the registered agent and office are:			
	C T Corporation System		2014		
•	O . Corporation System	(Name)	一点。因		
	1200 South Pine Island Road		20		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
			그 그들이 무		
	Plantation	FI. 33324			

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 605, Florida Statutes.

By: C T Corporation System Signature) Nathan S. Giffin Asst. 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

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SP FIBER TECHNOLOGIES SOUTHEAST, 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 NINETEENTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5198877 8300

140198749

CATION: 1144711

DATE: 02-19-14

850-617-6381

2/21/2014 9:21:31 AM PAGE 17001 Fax Server



Fabruary 21, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: SP FIBER TECHNOLOGIES SOUTHEAST, LLC

REF: W14000011413

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$916.25. Fee should be - 8 777.50 penalty fee + = 125.00 filing fee.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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) 245-6051.

Barbara Bostick Regulatory Specialist II FAX Aud. #: H14000041759 Letter Number: 014A00003914

RE-SUBMIT

Therese relatin original filling

FEB 21

P.O BOX 6327 - Tallahassee, Florida 32314 018 01 SUDMISSION 2120