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#### **COVER LETTER**

TO: Registration Section
Division of Corporations

□ \$125.00 Filing Fee

MetroWave of South Florida 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:

Colin Cave	·		
	Name of Person		
	Firm/Company		
320 NE 69 C	, ,		
	Address		
Boca Raton,	Florida 33487		<u></u>
	City/State and Zip Code	- · · · · ·	
ccave@metro	o-wave.net		ESE ASE
E-mail ad	dress: (to be used for future annual report noti	fication)	
urther information concerning this matter,	, please call:		
Colin Cave	<sub>a</sub> ,561 \ 98	9-4426	ONIO
Name of Contact Pers	son Area Code	Daytime Telephone N	umber
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		

□ \$155.00 Filing Fee &

Certified Copy

□ \$130.00 Filing Fee &

Certificate of Status

■ \$160.00 Filing Fee, Certificate

of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 28, 2014

COLIN CAVE 320 NE 69 CIRCLE BOCA RATON, FL 33487

SUBJECT: METROWAVE OF SOUTH FLORIDA LLC

Ref. Number: W14000019831

We have received your document for METROWAVE OF SOUTH FLORIDA LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 the name of the registered agent.,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tammi Cline Regulatory Specialist II

Letter Number: 614A00006677



#### MetroWave of South Florida, LLC

Carrier Class Communications

Colin Cave
320 NE 69 Circle
Boca Raton Florida 33487
561-989-4426
ccave@metr-wave.net

April 8 2014

Attention: Tammi Cline, Regulatory Specialist II

Dear Ms. Cline

Reference: MetroWave Of South Florida LLC Ref Number: W14000019831: Letter

614A0000667

As per your attached letter dated March 28, 2014 I have attached a Certificate of Good Standing.

In addition I have Inserted the title of the person authorized to manage the LLC.

Thank you very much for your assistance.

Respectfully

Colin Cave

### 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:

	oility Company," "L.L.C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting busines iability Company," "L.L.C," or "LLC.")	ss in Florida. The alternate name must include "Limited
Delaware 3, 46-129	94236
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
none	
(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determin	o registration.) e penalty liability)
44 W Flagler Street, Suite 1550	2011 SE
Miami Florida 33130	CRET AR
(Street Address of Principal Offi	lce) SS = F
44 W Flagler Street, Suite 1550	Fig. 7
Miami Florida 33130	LOSIA TI
(Mailing Address)	om 6
7. The name, title or capacity and address of the person(s) who ha	as/have authority to manage is/are:
Colin Cave 、 <i>M G R</i>	
14 W Flagler Street, Suite 1550	
rittilagioi olloot, oalto 1000	
Miami Florida 33130	

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.

	the Limited Liability Company is:  ve of South Florida LLC		
If unavailable, tl	ne alternate to be used in the state of Florida is:		
2. The name and	the Florida street address of the registered age  COLIN CAVE  44 W Flagler Street	nt and office are:	201
	Suite 1550	LAHASSE	2014 /PR 11
·	Florida Street Address (P.O. Box NOT AC  Miami FL 33130	CEPTABLE)	PM 4: 00
	City/State/Zip		<b>G</b>

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.

(Signature)

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

# Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "METROWAVE OF SOUTH FLORIDA, 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 TWENTY-EIGHTH DAY OF MARCH, A.D.

2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "METROWAVE OF SOUTH FLORIDA, LLC" WAS FORMED ON THE NINTH DAY OF OCTOBER, A.D. 2012.

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

5225159 8300

140398969

Jeffrey W. Bullock, Secretary of Sta AUTHENTYCATION: 1249451

DATE: 03-28-14

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