10/27/2014 10:06:0 Division of Co

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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

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Foreign Limited Liability Company Fiber Technologies Solutions, LLC

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10/24/2014

COVER LETTER

UBJECT: Piber Technologies Soli	ons, LLC			
Name of Limited Liability Company				
he enclosed "Application by Forcigi xistence, and check are submitted to	imited Liability Company for Authorization to Transact Business in Florida," Certificate of gister the above referenced foreign limited liability company to transact business in Florid			
lease return all correspondence cond	ring this matter to the following:			
Natasha	/right			
	Name of Person			
	Finn/Compsny			
11770 U.S	fwy 1, Suite 101			
<u> </u>	Address			
Palm Bea	Gardens, FL 33408			
	City/State and Zip Code			
stete.ammalfilings@	eomine.com			
	nail address: (to be used for future annual report sottification)			
or further information concerning th	nalter, please call:			
	561 799-2272			
Natasha Wright Name of Co	at (
Mittie of Co	et Person Arau Code Daymine I diepholae Rumber			
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations	Division of Corporations Registration Section			
Registration Section P.O. Box 6327	Registration Section Clifton Building			
Tallahassee, i'L 32314	2661 Executive Center Circle			
	2001			

10/27/2014 10:06:04 From: To: 8506176383

(2/6)

850-617-6381

10/27/2014 8:23:29 AM PAGE 1/001 Fax Server



October 27, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

RE-SUBMIT

SUBJECT: FIBER TECHNOLOGIES SOLUTIONS, LLC

REF: W14000064896

Plant to the distribution of the distribution

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.

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.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H14000249316 Letter Number: 214A00022879

RECEIVED

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31VISION OF CURPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

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. Fiber Technologies Solutions, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include	 'Llmited
Liability Company," "I.L.C." or "LLC.")	
2, Delaware 3, 32-0449290	
(Jurisdiction under the law of which foreign limited liability (FBI number, if applicable)	
company is organized)	
4. Upon Qualification	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5 3190 Hwy 78, Laganville, GA 30052	ورو وري درو وري
	بمنبئة المستنا
(Street Address of Principal Office)	
6. 11770 U.S. Hwy 1, Suits 101, Palm Beach Gardens, FL 33408	蜀江
<u> </u>	一 复形
	~~~
(Malling Address)	
m min and the second of the se	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Steven Niclsen, 11770 U.S. Hwy 1, 101, Polm Beach Gardens, FL 33408 (Manager)	
H. Andrew DeFerrari, 11770 U.S. Hwy 1, 101, Palm Beach Gardens, FL 33408 (Moon a ex)	
3	
	NT's.e.
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the	
having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is nacceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the tr	
must be submitted)	maiami
must be submitted)	
CLON:	
Signature of an authorized person	
(in accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of penjury that the facts stated	

H. Andrew DeFerrari, Manager

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.

f unavailable, the alterna	ate to be used in the state of Florida is:	
,		-d.c. 28
. The name and the Flo	rida street address of the registered agent and office are:	78 CONT 2
	C T Corporation System (Name)	
	1200 South Pine Island Road	ELONIDE ELONIDADO
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	Om on

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:

Angel Numez

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

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIBER TECHNOLOGIES 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 TWENTY-THIRD DAY OF OCTOBER, A.D. 2014.

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

5605668 8300

141328014

You may varify this cortificate enline at corp.delaware.gov/authver.shtml

AUTHENTICATION: 1805573

DATE: 10-23-14