## M15 00 0001676

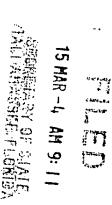
| (Re                                     | questor's Name)   |           |  |  |
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| (Add                                    | dress)            |           |  |  |
| · (Add                                  | dress)            |           |  |  |
| (Čit                                    | y/State/Zip/Phone | · #)      |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL      |  |  |
| (Business Entity Name)                  |                   |           |  |  |
| (Document Number)                       |                   |           |  |  |
| Certified Copies                        | Certificates      | of Status |  |  |
| Special Instructions to Filing Officer: |                   |           |  |  |
|   |                   |           |  |  |
|   |                   |           |  |  |
|   |                   | :         |  |  |

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February 3, 2015

LUCAS SMITH 1600 PARKWOOD CIRCLE SE ATLANTA, GA 30341

SUBJECT: DIAL AN EXCHANGE, LLC

Ref. Number: W15000007690

We have received your document for DIAL AN EXCHANGE, 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):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return the corrected original and one copy of 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.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

Letter Number: 315A00002138

#### **COVER LETTER**

Registration Section Division of Corporations

TO:

|                                   | Nan   | me of Limited Liability Company   |             |
|-----------------------------------|---|---|-------------|
|                                   |   | ability Company for Authorization to Transact Business in Florabove referenced foreign limited liability company to transact      |             |
| Please return all co              | orrespondence concerning this ma  | natter to the following:  |             |
| -                                 | Lucas A. Smith, Esq.  | Name of Person  |             |
| -                                 | Taylor English Duma, LLP  |   |             |
|                                   |   | Firm/Company  |             |
| -                                 | 1600 Parkwood Circle SE   | Address   | <del></del> |
| -                                 | Atlanta, GA 30341   | City/State and Zip Code   |             |
| _                                 | Ismith@taylorenglish.com<br>E-mail address                                    | ss: (to be used for future annual report notification)  |             |
| For further inform                | ation concerning this matter, plea  | ease call:  |             |
| Lu                                | ucas A. Smith  Name of Contact Person   | at ( 678 ) 336-7283 Area Code Daytime Telephone Number  | <br>er      |
| Division<br>Registrat<br>P.O. Box | of Corporations ion Section 6327 see, FL 32314                                | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |             |
|                                   | heck for the following amou<br>00 Filing Fee \$130.00 Filin<br>Certificate of | ing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fe  |             |

#### 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. Dial An Exchange, LLC (Name of Foreign Limited Liability Company; must incl   | lude "Limited Liability Co                                      | ompany," "L.L.C.," o           | or "LLC.")               | <del></del>          |
|--|---|--------------------------------|--------------------------|----------------------|
| (If name unavailable, enter alternate name adopted for the purpose of t Liability Company," "L.L.C," or "LLC.")  | transacting business in Flo                                     | orida. The alternate n         | ame must incl            | lude "Limited        |
| Arizona     (Jurisdiction under the law of which foreign limited liability company is organized)   | 3. <u>98-0428084</u> (E   | El number, if applic           | able)                    |                      |
| 4. (Date first transacted business in (See sections 605.0904 & 605.090)  | n Florida, if prior to regist<br>5, F.S. to determine penals    | ration.)<br>ty liability)      |                          |                      |
| 5. 7720 North 16th Street, Suite 400   |   |                                |                          |                      |
| Phoenix, AZ 85020-7405 (Street Address   | ss of Principal Office)   | 24.05                          |                          | <del> </del>         |
| 6. 7720 North 16th Street, Suite 400   |   |                                |                          |                      |
| Phoenix_AZ 85020-7405 (Mail  | ling Address)   |                                | eneral<br>energy of the  | <del></del>          |
| 7. The name, title or capacity and address of the per  | rson(s) who has/hav   | re authority to m              |                          | 7<br>Be:             |
| Fermin Cruz - Vice President   | Corbett Howa  | ard - Vice Preside             | 44                       | j sansar             |
| 7720 North 16th Street, Suite 400  | 7720 North 1  | 6th Street, Sulte              | 400 <u> </u>             |                      |
| Phoenix, AZ 85020-7405   | Phoenix, AZ   | 85020-7405                     | 65 <b>5</b>              | •                    |
| 8. Attached is an original certificate of existence, no having custody of records in the jurisdiction under th acceptable. If the certificate is in a foreign language, must be submitted)  Signature of a Signature of a submitted in a document to the Department of t | ne law of which it is a translation of the an authorized person | organized. (A pertificate unde | photocopy or oath of the | is not he translator |
| Fermin Cruz  |   |                                |                          |                      |
|  | ed name of signee   |                                | <del></del>              |                      |

### 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.

| 1. The name   | of the Limited Liability Com  | pany is:  |   |
|---|---|---|---|
| Dial A  | n Exchange, LLC   |   |   |
| If unavailable,   | the alternate to be used in th  | e state of Florida is:  |   |
| 2. The name a   | and the Florida street address  | of the registered agent and office are:   |   |
|   | C T Corporation   | System  |   |
|   |   | (Name)  | <del></del>   |
|   | 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)  |   |   |
|   |   | ,   | MAR I   |
|   | Plantation,   | FL 33324  |   |
|   |   | City/State/Zip  |   |
|   |   |   | က်ာတ် ဟာ ကြ   |
| liability compan<br>registered ageni<br>statutes relating | ty at the place designated in t<br>t and agree to act in this capa<br>to the proper and complete p  | to accept service of process for the aborthis certificate, I hereby accept the appoints. I further agree to comply with the performance of my duties, and I am fam tered agent as provided for in Chapter | ointment as —<br>e provisions of all<br>villar with and |
| A   | A STATE OF THE PROPERTY OF THE PARTY OF THE | lernell Rearney   | Asst. Secretary   |
| •   | (Signa  | ture)   |   |
|   | \$ 100.00   | Filing Fee for Application  |   |
|   | \$ 25.00  | Designation of Registered Agent   |   |
| •   | \$ 30.00  | Certified Copy (optional)   |   |

5.00 Certificate of Status (optional)



# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

#### CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Jodi A. Jerich, Executive Director of the Arizona Corporation Commission, do hereby certify that

\*\*\*DIAL AN EXCHANGE, LLC\*\*\*

a domestic limited liability company organized under the laws of the State of Artzona did organize on the 10th day of May 2007.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et sag, the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 23rd Day of January, 2015, A. D.



Jodi A. Jerich, Executive Director

y: \_\_\_\_\_1177930