

MI 5000662704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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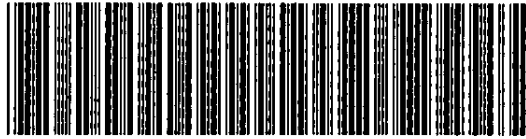
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 MAR 12 PM 1:56
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FLORIDA
SECRETARY OF STATE

6391



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 10, 2015

MIA SMITH
5495 BRYSON DR #423
NAPLES, FL 34109

SUBJECT: ID CONSULTING SOLUTIONS, LLC
Ref. Number: W15000016952

We have received your document for ID CONSULTING 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):

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

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: 915A00004829

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ID Consulting Solutions, 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:

Mia Smith / Michael Palkeschi
Name of Person

FTE Networks
Firm/Company

5495 Bryson Drive #423
Address

Naples, FL 34109
City/State and Zip Code

Smith @ cmkra.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mia Smith at (267) 262-0687
Name of Contact 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

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. IO Consulting 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Idaho 3. 262 636 103
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 2/25/2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

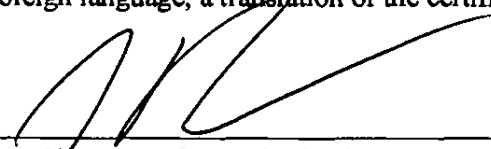
5. 5495 Bryson Drive Suite 423
naples, FL 34109
(Street Address of Principal Office)

6. 5495 Bryson Drive Suite 423
naples, FL 34109
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

John Klumpp, managing director 5495 Bryson Drive #423 Naples FL 34109
Michael Palletsch, managing director 5495 Bryson Drive #423 Naples FL 34109

8. 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 oath of the translator must be submitted)


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 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.)

Michael Palletsch
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.

1. The name of the Limited Liability Company is:

IO Consulting Solutions, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Michael Ballestri
(Name)

5495 Bryson Drive #423
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Naples FL 34109
City/State/Zip

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15 MAR 12 PM 1:56
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF MIAMI
FLORIDA

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]
(Signature)

\$ 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 Idaho

Office of the Secretary of State

CERTIFICATE OF EXISTENCE

OF

ID CONSULTING SOLUTIONS, LLC

File Number W-74068

I, LAWRENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that I am the custodian of the limited liability company records of this State.

I FURTHER CERTIFY That the records of this office show that the above-named limited liability company filed a certificate of organization in Idaho on 5/06/2008.

I FURTHER CERTIFY That the limited liability company's certificate of organization has not been dissolved.

Dated: 2/25/2015 7:30 AM



A handwritten signature in cursive script, reading "Lawrence Denney", written over a vertical stamp that reads "NOTARIZED".

FILED
15 MAR 12 PM 1:56

SECRETARY OF STATE