

M15000008138

Florida Department of State  
Division of Corporations  
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Division of Corporations  
Fax Number : (850) 617-6383

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Account Name : SPIEGEL & UTRERA, P.A.  
Account Number : FCA000000001  
Phone : (305) 854-6000  
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TALLAHASSEE, FLORIDA

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**Foreign Limited Liability Company  
TDC FIBERCOM, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 04       |
| Estimated Charge      | \$125.00 |

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October 12, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SPIEGEL &amp; UTRERA, P.A.

SUBJECT: TDC FIBERCOM, LLC  
REF: W15000067427FILED  
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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.

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.

Jenna D Harris  
Regulatory Specialist IIFAX Aud. #: H15000242783  
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TALLAHASSEE FLORIDA

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P.O. BOX 6327 - Tallahassee, Florida 32314

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**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. **TDC FIBERCOM, 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. **NEW JERSEY**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **Not available**

(FEI number, if applicable)

4. **UPON FILING**

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

5. **8888 Collins Avenue, Unit 111, Surfside, Florida 33154**

(Street Address of Principal Office)

6. **8888 Collins Avenue, Unit 111, Surfside, Florida 33154**

(Mailing Address)

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

**Jacqueline Teriaco, Manager**

**8888 Collins Avenue, Unit 111**

**Surfside, Florida 33154**

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)

*Jacqueline Teriaco*

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 § 817.155, F.S.)

**Jacqueline Teriaco, Manager**

Typed or printed name of signee

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**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:

**TDC FIBERCOM, 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:

**SPIEGEL & UTRERA, P.A.**

(Name)

**1840 SW 22nd Street, 4th Floor**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Miami,**

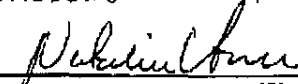
**FL 33145**

City/State/Zip

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*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.*

**SPIEGEL & UTRERA, P.A.**

BY: 

(Signature)

**NATALIA UTRERA, VICE-PRESIDENT**

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

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**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
H15000242783 DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

**TDC FIBERCOM LLC**

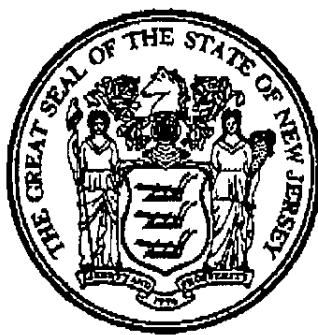
0600212599

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on September 8, 2004.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and registered office are:*

*Spiegel & Utrera P A  
642 Broad Street  
Suite 2  
Clifton, NJ 07013 0000*



Certification# 137386121

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed my  
Official Seal at Trenton, this  
6th day of October, 2015*

*Robert A. Romann*

Robert A. Romann  
Acting State Treasurer

Verify this certificate at  
[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)

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