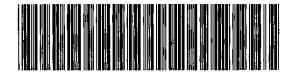
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#### COVER LETTER

Registration Section

Inteletel, LLC	· · · · · · · · · · · · · · · · · · ·				
	Name of	Limited Liability C	Company		
	reign Limited Liability Comp ed to register the above refer				
turn all correspondence	concerning this matter to the	following:			
Charity Arner					
	N	ame of Person			
Technologies I	Management, Inc.				
	F	irm/Company			
2600 Maitland	Center Parkway, Suite 300				
-		Address			
Maitland, FL 3	2751				
	City/S	tate and Zip Code			
carner@tminc.co	om				
	E-mail address: (to be use	d for future annual	report not	tification)	
er information concernir	ng this matter, please call:				
Charity Arner		407 at (	740-30	22	
Name	of Contact Person	Area Code	Day	time Telephone Number	
MAILING ADDRESS: Division of Corporation. Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section suilding ecutive Center Circle see, FL 32301	
is a check for the follow ■ \$125.00 Filing Fee	ving amount:  ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 29, 2015

CHARITY ARNER 2600 MAITLAND CENTER PARKWAY, SUITE 300 MAITLAND, FL 32751 US

SUBJECT: INTELETEL, LLC Ref. Number: W15000060609

We have received your document for INTELETEL, 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):

Please accept our apology for failing to mention this in our previous letter.

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.

Letter Number: 915A00019451

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

4. 43

IN COMPLIANCE WITH SECTION (45,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Inteletel, LLC						
	ign Limited Liability Company; must	include "Limited Lia	hility Company," "LL.C.," or	"LLC.")		
21.11		-6	a la Crasida d'Incolorante del	na nuu e in elude	91 Seekaal	
(If name unavailable, enter all Liability Company," "LLC,"	ternate name adopted for the purpose of "LLC.")	or chrispeting obsines	z (u cloting), the greidale um	ne masi bicinae	r.mangu	
2. lowa		3. 47-4006888				
(Jurisdiction under the law of company is organized)	of which foreign limited liability		(PEI number, if applicable	)	,	
4.	(Date first transacted business	in l'Iorida, il prior (c	registration.)	-		
5. 1713 McNaughton Wa	(See sections 605,0904 & 605.09	705, r.s. to determin	e penany hoomy	_		
Spencer, IA 51301				_		
∠ 1713 McNaughton Way	(Street Address of Pr	incipal Office)		_		
Spencer, IA 51301				_		
Spencer, IX 51501	(Mailing Ac	d(lress)		_		
7 Name and stead mildred	s of Florida registered agent: (P.O	New MOT secon	able)			
7. Maine and Airect address		, bux 1401 necept	COLO J	######################################	**************************************	
Name:	Corporation Service Company		-	2	F 5	
Office Address:	1201 Hays Street		_	E.A.	S S	2.2
	Tatlahassee		_ , Florida 32301	- <del>-</del> -	₩ <b>-</b>	g famou
Destruction describe accord	(City)		(Zip anda)	70,0	<b>流で</b> ー	1
Registered agent's accept	gistered agent and to accept servi-	ce of process for th	e above stated limited liab	Ility company	afthe pine	, F
designated in this upplical	lon. I hereby accept the appointn	nent as registered u	gent and agree to act in th	iis capacity. 🗜	fugiher <u>ac</u> t	ce 🕒
	ons of all statutes relative to the pr ny position as registered agent.	roper una campieri /	: perjormunce of my unites	s, and r units		attt
neacht wie dang-work ty		$_{5}$ $\mathcal{O}($	•	3	ਹਸਾ: <b>ਨ</b> >	
	(Register	red agent's eignature)		-		
	· -			•		
8. The name, title or capa	city and address of the person(s) v					
Josh Nelson, AMBR, Jo	hn Hass, AMBR	1713 McN	aughton Way, Spencer, IA	21301		
Kellin Beneke, AMBR, (	Candace Nelson, AMBR	1713 McN	nughton Wey, Spencer, IA	51301		
Jarry Helson, AMBR, S	tevin Dahl, AMBR	1713 McNi	ughton Way, Spencer, IA	51301		
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days of which it is organized. (If the cer obmitted)	s old, duly authentic tificale is in a forci	cated by the official having gn language, a translation o	custady of rec of the certificat	ords in the c under oat	b
	77		6.			
	Signature o	of an authorized perso	n	****		
This document is executed submitted in a decument to	in accordance with section 605.02 the Department of State constitute	203 (1) (b), Florida	Statutes. I am aware that an	ry false informa 7.155. F.S	ition	
sabinited in a document to						
	Tyocd or nri	inted name of signee	UL, AMBR	<del></del>		
	->1 ->					

## IOWA SECRETARY OF STATE PAUL D. PATE



### **CERTIFICATE OF EXISTENCE**

Date: 9/22/2015

Name: INTELETEL, LLC (489DLC - 501624)

Date of Incorporation: 5/13/2015

**Duration: PERPETUAL** 

I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. The Secretary of State has not administratively dissolved the limited liability company.
- e. The Secretary of State has not filed either a statement of dissolution or statement of termination.

Certificate ID: CS112599

To validate certificates visit:

sos.iowa.gov/ValidateCertificate

Fant D. Pate

Paul D. Pate, Iowa Secretary of State