# MINDOORY

(Red	questor's Name)				
(Add	dress)				
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(City	//State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Doc	cument Number)				
Certified Copies	Certificates	of Status			
Special Instructions to F	_				
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2016

### FLORIDA FILING & SEARCH SERVICES

SUBJECT: CLEAR LINK TECHNOLOGIES, LLC

Ref. Number: W16000023010

We have received your document for CLEAR LINK TECHNOLOGIES, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L13000063198.

A certificate of existence or a certificate of good standing, dated no more than 900 days prior to the delivery of the application to the Department of State, duty 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.

Deborah Bruce

Regulatory-Specialist-II

Letter-Number+416A00006362

www.sunbiz.org

lease Keep

sion of Corporations - PO ROX 6327 -Tallahassee Fld

hank S!

16 APR - 7 PH 4:40

## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

3/28/16

NAME:

CLEAR LINK TECHNOLOGIES, LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

## **COVER LETTER**

	stration Section ion of Corporations					
SUBJEC	CLEAR LINK TECHNOLOGIES, LLC					
SOBJEC	Name of Limited Liability Company					
	'Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cer check are submitted to register the above referenced foreign limited liability company to transact business					
Please re	all correspondence concerning this matter to the following:					
	JONATHAN GEE					
	Name of Person					
	CLEAR LINK TECHNOLOGIES, LLC					
	Firm/Company					
	5202 W DOUGLAS CORRIGAN WAY, SUITE 300					
	Address					
	SALT LAKE CITY, UT 84116					
	City/State and Zip Code					
	JONATHAN.GEE@CLEARLINK.COM	***************************************				
	E-mail address: (to be used for future annual report notification)					
For further	ormation concerning this matter, please call:					
	ATHAN GEE 385 290-1506 T	Ü				
·	Name of Contact Person Area Code Daytime Telephone Number					
] ] ]	LING ADDRESS:  STREET ADDRESS:  Division of Corporations tration Section  Box 6327  Clifton Building massee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301	er that				
	heck for the following amount:  25.00 Filing Fee	cate				

## 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 INTUE STATE OF FLORIDA:

	ign Limited Liability Company; mu			
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpos for "LLC.")	se of transacting bu	siness in Florida. The alternate n	ame must include "Limited
2 DELAWARE		3 13-4278		
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicab	(c)
4. 04/01/2016				
· ·	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida, if pr 5.0905, F.S. to dete	ior to registration.)	and a second
5. 5202 W DOUGLAS C	ORRIGAN WAY, SUITE 300			
SALT LAKE CITY, U	Т 84116			
, , , , , , , , , , , , , , , , , , ,	(Street Address of	Principal Office)		· +
6. <u>5202 W DOUGLAS CO</u>	ORRIGAN WAY, SUITE 300		PAGE 4 didds as a dalai de r	
SALT LAKE CITY, U	Т 84116			का अन्य अन्य अभिनेत्र
		Address)		
7. Name and street addres	s of Florida registered agent: (P	O. Box NOT ac	rceptable)	
Name:	Paracorp Incorporated	<del></del>	•	
		t - 4 Pl - · ·		
Office Address:	155 Office Plaza Drive,		W- 80A-	
	Tallahaggaa		22201	
	Tallahassee		, Florida <u>32301</u>	_
Registered agent's accept	(City)		(Zip code)	
Having been named as reg designated in this applican to comply with the provision	(City)	vice of process fo tment as register	(Zip code) or the above stated limited lia red agent and agree to act in t	his capacity. I further agree
Having been named as reg designated in this applican to comply with the provision	(City) tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the ny position as registered agent.  see at	vice of process for tment as register proper and com	(Zip code)  or the above stated limited lia  red agent and agree to act in to  plete performance of my duti	this capacity. I further agree es, and I am fumiliar with and
Having been named as reg designated in this applican to comply with the provision	(City) tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the ny position as registered agent.  see at	vice of process fo tment as register proper and com	(Zip code)  or the above stated limited lia  red agent and agree to act in to  plete performance of my duti	this capacity. I further agree es, and I am fumiliar with and
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Having been named as reg designated in this applicate to complywith the provision accept the obligations of name, title or capa BEN HENDERSON (PRI 5202 W DOUGLAS COR SALT LAKE CITY, UT 8	(City) tance: gistered agent and to accept ser fion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.  See at (Regist city and address of the person(s) ESIDENT) RIGAN WAY, SUITE 300 (4116) of existence, no more than 90 da of which it is organized. (If the co- bimitted)	ttached tered agent's signal who has/have at	(Zip code)  or the above stated limited lia  ed agent and agree to act in to  plete performance of my duti  aure)  athority to manage is/are:  enticated by the official having  oreign language, a translation	this capacity. I further agree ess, and I am familiar with a management of the seconds of the plant with a management of the seconds of the plant with a management of the seconds of the second of the seconds of the second of the seconds of the second of the seconds of the second o

Typed or printed name of signee

BEN HENDERSON

## STATE OF FLORIDA

## REGISTERED AGENT CONSENT FORM

**DATE:** 3/25/16

ENTITY NAME: Clear Link Technologies, LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Sharon Cooke, Assistant Secretary Paracorp Incorporated

Sharon Cashe

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SECRETARISEE, FLERIOR

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CLEAR LINK TECHNOLOGIES, 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-FOURTH DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLEAR LINK TECHNOLOGIES, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF DECEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202041743

Date: 03-24-16

4918207 8300 SR# 20161869884

You may verify this certificate online at corp.delaware.gov/authver.shtml