

MI6000003102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

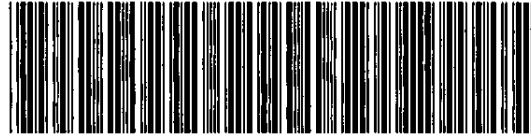
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W14-23564

Office Use Only



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2016 APR 13 P 2:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

APR 14 2016

S MASON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 30, 2016

KAREN HYDE
1420 SPRING HILL ROAD, SUITE 400
MCLEAN, VA 22102

SUBJECT: FLORIDA NTS, LLC
Ref. Number: W16000023564

We have received your document for FLORIDA NTS, 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):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Your form does not have the "Acceptance" paragraph - it appears there was a computer/prINTER issue,

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.

Stacey M Mason
Regulatory Specialist II

Letter Number: 816A00006534

The Compliance Group, Inc.
1420 Spring Hill Road, Suite 401
McLean, VA 22102

THE
COMPLIANCE
GROUP

April 6, 2016

Division of Corporations
Attn: Registration Section
P.O. Box 6327
Tallahassee, FL 32314

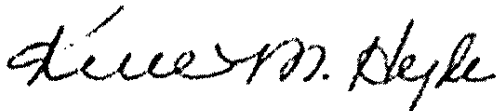
Re: Florida NTS, LLC - Application for Registration (FL) Re-filing
Attention -

Please accept this Application for Registration (FL) re-filing on behalf of Florida NTS, LLC.

The Company has enclosed a copy of the rejection letter and the revised application .

Please do not hesitate to contact the undersigned directly with any questions about
this application at kmh@compliancegroup.com.

Respectfully Submitted,



Karen Hyde

On behalf of Florida NTS, LLC

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Florida NTS, 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:

Karen Hyde

Name of Person

The Commpliance Group

Firm/Company

1420 Spring Hill Road, Suite 400

Address

McLean, VA 22102

City/State and Zip Code

kmh@commpliancegroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Hyde

Name of Contact Person

at (**703**) **714-1306**

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 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. Florida NTS, 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. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 227 Sandy Springs Pl. Suite D-338
Sandy Springs, GA 30328
(Street Address of Principal Office)

6. 227 Sandy Springs Pl., Suite D-338
Sandy Springs, GA 30328
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: NRAI Services, Inc.
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Linda Stauffer
(Registered agent's signature) Linda Stauffer, Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Broadband Transport I, LLC - Member
159 N Marion St. # 369
Oak Park, IL 60301

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

MELISSA WILLIAMS
Typed or printed name of signee

FILED
2016 APR 13 P 2:08
SECRETARY OF STATE
TAMMUSE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FLORIDA NTS, 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-SIXTH DAY OF FEBRUARY, A.D. 2016.



5972476 8300

SR# 20161140407

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

Authentication: 201895933

Date: 02-26-16