M/6000003386

(Requestor's Name)	
(Address)	600283800996
(Address)	00
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	100 M/6-33
LI FICK-OF LI WAIT	04/07/1801015001 **18
(Business Entity Name) W16 - 26393 (Document Number)	on Ho
Certified Copies Certificates of Status	APR 25 PH I
Special Instructions to Filing Officer: CONTROL OF CON	PHIS FILERING
4099 NO 7	

Office Use Only

APR 26 2016 N. CAUSSEAUX **180.00



April 8, 2016

GINA LAWRENCE ESSENTIA, INC. 11020 DAVID TAYLOR DRIVE, SUITE 103 CHARLOTTE, NC 28262

SUBJECT: ENETWORKS, LLC Ref. Number: W16000026393

We have received your document for ENETWORKS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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.

Nanette Causseaux Regulatory Specialist II Supervisor

Letter Number: 516A00007302

COVER LETTER

Registration Section

TO:

Div	ision of Corporation	ıs			
SUBJECT:	ENETWORKS LLC				
		Name of Limited Liability Company			
				ransact Business in Florida," Certificate of ty company to transact business in Florida	
Please return	all correspondence c	oncerning this matter to the	following:		
	GINA LAWRE	INCE			
	Name of Person				
	ESSENTIA, INC				
	Firm/Company				
	11020 DAVID TAYLOR DR, SUITE 103				
	Address				
	CHARLOTTE, NC 28262				
City/State and Zip Code					
GINA.LAWRENCE@ESSENTIA-INC.COM					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
GN	NA LAWRENCE		704 658-3°	787	
	Name o	f Contact Person	Area Code Da	ytime Telephone Number	
Div Reg P.O	ision of Corporations gistration Section b. Box 6327 lahassee, FL 32314		Divisior Registra Clifton 1 2661 Ex	T ADDRESS: a of Corporations tion Section Building tecutive Center Circle tisee, FL 32301	
	a check for the follow \$125.00 Filing Fee	ing amount: ☐ \$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: ENETWORKS, July C (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") ENETWOCKS NC. (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 81-2036172 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 6/1/16 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 11020 DAVID TAYLOR DRIVE SUITE 103 CHARLOTTE, NC 28262 (Street Address of Principal Office) 11020 DAVID TAYLOR DRIVE SUITE 103 CHARLOTTE, NC 28262 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) TERESA HAYES Name: 3000 1ST STREET SOUTH Office Address: Florida 32250 JACKSONVILLE BEACH (City) 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 complywith 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. (egistered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: JARROD T HAYES, MANAGER 11020 DAVID TAYLOR DR SUITE 103 CHARLOTTE NC 28262 BAXTER M HAYES, III, MANAGER 11020 DAVID TAYLOR DR SUITE 103 CHARLOTTE NC 28262 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 of an authorized person

Typed or printed name of signee

BAXTER M HAYES, III

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.

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ENETWORKS, 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 FIFTH DAY OF APRIL, A.D. 2016.

16 APR 25 PM 12: 54

Authentication: 202097726

Date: 04-05-16

6000110 8300 SR# 20162090843