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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 8, 2016

LAUREN PAHMIYER 901 S. MOPAC EXPRESSWAY, BLDG. III SUITE 200 AUSTIN. TX 78746

SUBJECT: BYPASS MOBILE, LLC Ref. Number: W16000026342

We have received your document for BYPASS MOBILE, 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):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$1193.75.

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 Warren Regulatory Specialist II

Letter Number: 416A00007291

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: BYBASS Mobile 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:
Lauren Pahmiyer Name of Person
Bypass Mobile LLC Firm/Company
901 S. Mopac Expy, bldy III ste 200
Austin TX 78746 City/State and Zip Code
LAUREN C BYPASS mobile. (om E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lawer Pahmiyer at (28) 795-2203 Name of Contact Person 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: \$\Bigsim \\$125.00\$ Filing Fee \(\text{Certificate} \) \$\text{155.00} Filing Fee \(\text{Certificate} \) \$\text{Certificate} \(\text{Certified Copy} \) \$\text{Status} \(\text{Certified Copy} \) \$\text{Status} \(\text{Certified Copy} \)

APPLICATION BY FOREIGN LIMITED LIABILITY MPANY 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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA: (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.") Travis County Jurisdiction under the law of which foreign limited liability company is organized) 2011 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) (Street Address of Principal Office) गिर्वव (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee Florida (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.
Corporation Service Company Holly Jones **Assistant Vice President** Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: AustiniTX 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

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.

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Bypass Mobile, LLC (file number 801252155), a Domestic Limited Liability Company (LLC), was filed in this office on April 05, 2010.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 30, 2016.



Carlos H. Cascos

Secretary of State

: (512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 663403680005