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(Business Entity Name)

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Special Instructions to Filing Officer:

W16-85449 CW

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2017 JAN -3 PM 5:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
JAN -3 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2016

SHERRI L ROBERTS
111 W 16TH AVE, STE. 100
ANCHORAGE, AK 99501

SUBJECT: CCI UTILITY SERVICES, LLC
Ref. Number: W16000085449

We have received your document for CCI UTILITY SERVICES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly 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.

Karen A Saly
Regulatory Specialist II

Letter Number: 216A00027257

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CCI Utility Services, 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:

Sherri L Roberts

Name of Person

Firm/Company

111 W 16th Ave, STE 100

Address

Anchorage, AK 99501

City/State and Zip Code

tax@bbrs-llc.com

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

For further information concerning this matter, please call:

Sherri L Roberts

907

793-9219

at (_____) _____

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:

☐ \$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. CCI Utility Services, 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. Alaska

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 47-3698713

(FEI number, if applicable)

4. 09/30/2016

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

5. 111 W 16th Ave, STE 300

Anchorage, AK 99501

(Street Address of Principal Office)

6. 111 W 16th Ave, STE 300

Anchorage, AK 99501

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation Systems

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.

Agnes Broszczak, Asst Secretary

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

J Duncan Morrison, President/CEO; 111 W 16th Ave, STE 300; Anchorage, AK 99501

Adam Kelly, General Manager; 111 W 16th Ave, STE 300; Anchorage, AK 99501

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.

Sherri L Roberts, Tax Analyst, Authorized Person

Typed or printed name of signee

FILED
2011 JAN -3 PM 5:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Alaska Entity #10028633

State of Alaska
Department of Commerce, Community, and Economic
Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

CCI Utility Services, LLC

This entity was formed on April 08, 2015 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective October 14, 2016.

Chris Hladick
Commissioner

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA