M170000359

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	<u> </u>
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



700294078587

JAN 11 2017 S. YOUNG TALL'ANASSEE, FEBRUO,

TOWN TO FILE 24

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 460838 7966799

AUTHORIZATION (

COST LIMIT : \$ 125.00

ORDER DATE: January 10, 2017

ORDER TIME : 3:29 PM

ORDER NO. : 460838-010

CUSTOMER NO: 7966799

FOREIGN FILINGS

NAME: WAVEGUIDE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

IT JAN IO AM 8: O

TALEAHASSEE REGRIDA

COVER LETTER

	Waveguide LLC						
SUBJECT:							
		Name of	Limited Liability	Сотралу			
The enclosed Existence, ar	d "Application by For and check are submitted	reign Limited Liability Com ed to register the above refer	pany for Authoriz enced foreign lim	ation to Tr ited liabili	ansact Business in Florida," (by company to transact busine	Certificate ess in Floric	of da.,
Please return	all correspondence	concerning this matter to the	following:				
		N	ame of Person				
	Firm/Company						
	Address						
		City/S	tate and Zip Code			17 .	SECT
		City/s	tate and Zip Code	•		JAN 10	
		E-mail address: (to be use	d for future annua	l report no	tification)) AH	THE STATE OF
For further in	formation concerning	g this matter, please call:					E 51
Lor	i Morrow		704 at (328-76)	64	8: 01	
	Name o	f Contact Person	Area Code	Day	rtime Telephone Number		- •
Divi Reg P.O.	ILING ADDRESS: ision of Corporations istration Section Box 6327 ahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section duilding ecutive Center Circle see, FL 32301		
	check for the follow 125.00 Filing Fee	ing amount: □ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

١,

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:

COMMITTIONIVENDICIDE	AMINELLY IN THE ENTERTISE OF TEXASIONS.		
Waveguide LLC			
(Name of Fore	ign Limited Liability Company; must include "Limite	ed Liability Company," "L.L.C.," or "LLC	.")
(If name unavailable, enter a Liability Company," "L.L.C.	tternate name adopted for the purpose of transacting b	usiness in Florida. The alternate name mus	st include "Limited
2. North Carolina	3 58-2325	380	
	of which foreign limited liability	(FEI number, if applicable)	
4. Upon filing			
	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to dete	rior to registration.) ermine penalty liability)	
5. One West Court Squar	e, Suite 300		
Decatur, GA 30030			
	(Street Address of Principal Office)		
6. 2400 Yorkmont Road			
Charlotte, NC 28217			17
	(Mailing Address)		=
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT a	cceptable)	
Name:	Corporation Service Company		0 0
Office Address:	1201 Hays Street		AM 8:
	Tallahassee	, Florida 32301	o 🕌
	(City)	(Zip code)	چا:
designated in this applica to complywith the provision	gistered agent and to accept service of process fion, I hereby accept the appointment as registerons of all statutes relative to the proper and commy position as registered agent. Corporation Service Company	red ugent und agree to act in this cap uplete performance of my duties, and	acity. I further agree
	Registered agent s signa		ce President
g The area date			or resident
•	icity and address of the person(s) who has/have a inance, One West Court Square, Suite 300, Deca	· · ·	
		,	
Richard Rossitch, Assista	nt Sccretary, 2400 Yorkmont Road, Charlotte, No	C 28217	
Scott A. Walker, Presiden	t, One West Court Square, Suite 300, Decatur, G	A 30030	
	of existence, no more than 90 days old, duly author which it is organized. (If the certificate is in a submitted) When the submitted of an authorized of an authorized of an authorized.	foreign language, a translation of the c	
	Signature of an authorized	person	
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b), Flo the Department of State constitutes a third degre	rida Statutes. I am aware that any false e felony as provided for in s.817.155,	information F.S.
	Richard Rossitch, Assistant Secretary	·	

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

WAVEGUIDE LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 1st day of December, 2016, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 10th day of January, 2017.

Elaine J. Marshall

Secretary of State