Myddolks

| (Req | uestor's Name) | | | | |
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| (Add | ress) | | | | |
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| · | ŕ | | | | |
| (City | /State/Zip/Phone | e #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Doc | cument Number) | | | | |
| Certified Copies | Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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| GAU M | n-6072 | | | | |

Office Use Only



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FEB 0 9 2017 S. YOUNG SECRETARY OF STATE TALLAHASSEE, FLOSION



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 23, 2017

ANGIE BAER FAIRFIELD COMMUNICATIONS, LLC 9109 WATSON ROAD STE 400 SAINT LOUIS, MO 63126

SUBJECT: FAIRFIELD COMMUNICATIONS, LLC

Ref. Number: W17000006072

We have received your document for FAIRFIELD COMMUNICATIONS, 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):

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.

Shelia H Young Regulatory Specialist II

Letter Number: 117A00001381

MITER-B PH 3: 13

SECRETARY OF SIGNOR FALLAHASSEE, FLORIDA

COVER LETTER

| TO: | Registration Section Division of Corporation | ns | | | | |
|-----------|---|---|------------------------------------|--|---|------------------|
| SUBJE | Fairfield Communi | cations, LLC | | | | |
| | | Name of | Limited Liability | Company | | _ |
| | | reign Limited Liability Com ed to register the above refer | | | | |
| Please ro | eturn all correspondence | concerning this matter to the | following: | | | |
| | Angie Baer | | | | | |
| | | N | lame of Person | | | _ |
| | Fairfield Communications, LLC | | | | | |
| | Firm/Company | | | | | |
| | 9109 Watson Road, Ste 400 | | | | | _ TALLA |
| | Address | | | | | HE REL |
| | Saint Louis, M | O 63126 | | | | JAN 20 AM II: 19 |
| | | City/S | State and Zip Code | | | 量 市 |
| | abaer@gjgrewe. | | | | | = 108 |
| | | E-mail address: (to be use | ed for future annual | report not | ification) | 19 |
| For furth | er information concernir | ng this matter, please call: | | | | |
| | Angie Baer | | 314 at (| 222-60 | 41 | |
| | Name | of Contact Person | Area Code | Day | time Telephone Number | |
| | MAILING ADDRESS: Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314 | | | Division Registrat Clifton B 2661 Exe | of Corporations ion Section duilding secutive Center Circle see, FL 32301 | |
| Enclosed | d is a check for the follow ☐ \$125.00 Filing Fee | ving amount: \$\Boxed{\text{S130.00 Filing Fee & Certificate of Status}}\$ | ☐ \$155.00 Filin Certified Copy | - | ☐ \$160.00 Filing Fee, Of Status & Certified Co | |

${\color{blue} \textbf{APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS} \\ {\color{blue} \textbf{IN FLORIDA}}$

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:

| Fairfield Communication | ons, LLC | | |
|---|--|--|---|
| (Name of Fore | ign Limited Liability Company; must include "Lim | ited Liability Company," "L.L.C.," or "LLC.") | |
| (If name unavailable, enter al Liability Company," "L.L.C. | ternate name adopted for the purpose of transacting or "LLC.") | business in Florida. The alternate name must in | clude "Limited |
| 2. Missouri | 3. 47-53 | 12462 | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI number, if applicable) | <u> </u> |
| 1. | (Date first transacted business in Florida, i | prior to registration.) | |
| 5. 9109 Watson Road, St | (See sections 605.0904 & 605.0905, F.S. to 6 | etermine pēnalty liability) | |
| Saint Louis, MO 63126 | | | - E |
| ! | (Street Address of Principal Office | *) | ، سما المستوات |
| 5. 9109 Watson Road, Ste | 400 | <u> </u> | 至宝 |
| Saint Louis, MO 63126 | | | 7 JAN 20 AM II: I |
| | (Mailing Address) | | |
| 7. Name and street addres | s of Florida registered agent: (P.O. Box NOT | _acceptable) | = |
| Name: | Parker Mount | | 19 |
| Office Address: | 530 Seabreeze Circle | | |
| 1 | Panama City Beach | , Florida 32413 (Zip code) | |
| ; Registered agent's accep | (City) | (Zip code) | |
| Having been named as re lesignated in this applica o complywith the provision | gistered agent and to accept service of proces ion, I hereby accept the appointment as regis ons of all statutes relative to the proper and co ny position as registered agent. | tered agent and agree to act in this capacit | ty. I further agree |
| | (Registered agent's sig | nature) | |
| 8 The name, title or capa | city and address of the person(s) who has/have | suthority to manage is/are. | |
| Gary J Grewe, Manager | | and the same of th | |
| 9109 Watson Road, Ste 40 | 0 | | . |
| Saint Louis, MO 63126 | | | - |
| D. Attached is a certificate urisdiction under the law of the translator must be su | of existence, no more than 90 days old, duly a of which it is organized. (If the certificate is in bmitted) | athersicated by the official having custody of a foreign language, a translation of the certi | of records in the ificate under oath |
| | Signature of an authorize | d person | |
| This document is executed submitted in a document to | in accordance with section 605.0203 (1) (b), I the Department of State constitutes a third dep | lorida Statutes. I am aware that any false inf tree felony as provided for in s.817.155, F.S | formation |
| 1 | Gary J. Grewe | | |
| 1 | Typed or printed name of | signee | |

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

IN COMPILANCE WITH SECTION 605,0802, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED DABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA **Fairfield Communications, LLC** (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.U.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.") 47-5342462 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 9109 Watson Road, Ste 400 Saint Louis, MO 63126 (Street Address of Principal Office) 9109 Watson Road, Ste 400 Saint Louis, MO 63126 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable) Parker Mount Name: 530 Seabreeze Circle Office Address: Panama City 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 affent. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has have authority to manage is/are: Gary J Grewe, Manager 9109 Watson Road, Ste 400 Saint Louis, MO 63126 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 present 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

Gary J. Grewe

STATE OF MISSOURI



John R. Ashcroft Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Fairfield Communications, LLC LC001443140

was created under the laws of this State on the 13th day of April, 2015, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 7th day of February, 2017.

Secretary of State

Certification Number: CERT-02072017-0063