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CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK UP: 3-31-17
	CERTIFIED COPY
3	РНОТОСОРУ
	CUS
otag	FILING E Foreign
1.	Blue CASa Telephone, LLC
	(CORPORATE NAME AND DOCUMENT #)
2.	(CORPORATE NAME AND DOCUMENT #)
•	
3.	(CORPORATE NAME AND DOCUMENT #)
4.	
	(CORPORATE NAME AND DOCUMENT #)
5.	(CORPORATE NAME AND DOCUMENT #)
6.	
v.	(CORPORATE NAME AND DOCUMENT #)
SPECIA	L INSTRUCTIONS:

COVER LETTER

Registration Section

TO:

Div	ision of Corporatio	ns								
SUBJECT:	BLUE CASA TEL	EPHONE, LLC								
SUBJECT.	Name of Limited Liability Company									
The enclosed Existence, at	d "Application by Fond check are submitted	reign Limited Liability Com ed to register the above refer	pany for Authorization to T enced foreign limited liabil	ransact Business in Florida," Ce ity company to transact business	ertificate of s in Florida					
Please return	all correspondence	concerning this matter to the	following:							
	Maria Long									
		N	me of Person							
	Compliance So	olutions, Inc.								
	242 Rangeline									
	Longwood, FL	. 32750								
		City/S	tate and Zip Code							
	mark@csilongw	rood.com								
		E-mail address: (to be use	d for future annual report n	otification)						
For further is	nformation concernir	ig this matter, please call:								
Ma	ria Long		407 260-1	011						
	Name	of Contact Person		sytime Telephone Number						
Div Reg P.O	ision of Corporation istration Section Box 6327 ahassee, FL 32314		Divisio Registr Clifton 2661 E	T ADDRESS: n of Corporations ation Section Building secutive Center Circle ssee, FL 32301						
	check for the follow 125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155,00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certi of Status & Certified Copy	ficate					

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:

(Name of Fore	ign Limited Liability Co	mpany; must include	e "Limited Liah	oility Company," "I	L.L.C.," or "LLC."	')
'name unavailable, enter al ability Company," "L.L.C."		the purpose of trans	sacting busines	s in Florida. The at	lternate name must	: include "Limited
CA		3.				
Jurisdiction under the law company is organized)	of which foreign limited	liability		(FEI number, if	applicable)	
03/20/2017						
	(Date first transa (See sections 605.0	icted business in Flo 1904 & 605 0905, F.	rida, if prior to S. to determine	registration.) penulty liability)		
114 E. Haley Street Su	iite A Santa Barbara, C				n.ú	
						page will
				., <u>-,.,.</u>	<u> </u>	3 /
		Address of Principal	Office)		100 100 100 100 100 100 100 100 100 100	1
114 E. Haley Street Sur	ite A Santa Barbara, C	A 93101				777
					79 P	·
		(Mailing Address)				. •
Name and street addres	ss of Florida registered			able)	OF STATE ORION	։ ກ
Name:	Corporation Service	Company		_		**
Office Address:	1201 Hays Street			_		
	Tallahassee			, Florida 32301 (Zi	1	
		(City)		, Florida(Zi	ip code)	
signated in this applica complywith the provision	gistered agent and to a tion, I hereby accept to ons of all statutes relati my position as register Corporation Service By:	tive to the proper of agent. Company	s registered a and complete	gent and agree to performance of	o act in this capa	acity. I further a
	Sarah Thomas, Ass	(Registered age	nt's signature)			
The name, title or capa			s/have author	ity to manage is/a	are:	
ff Compton, Member 1	14 E. Halev Street Suit	e A Santa Barbar	a, CA 93101	-		
			<u></u>			
<u> </u>	····					<u> </u>
Attached is a certificate isdiction under the law the translator must be so	of which it is organized					
		Signature of an au	thorized person	4		
		Signature of all au	morraed person	•		
	I in accordance with sec the Department of Sta	ction 605.0203 (1)	(b), Florida S	Statutes. I am awa		

Typed or printed name of signee

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: BLUE CASA TELEPHONE, LLC

FILE NUMBER: FORMATION DATE:

201102510312 01/25/2011

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

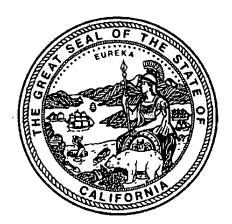
STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 27, 2017.

ALEX PADILLA Secretary of State