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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 20, 2017

TANIA THOMPSON 813 CRESTWELL CIR SW ATLANTA, GA 30331

SUBJECT: TELECON LLC Ref. Number: W17000004750

We have received your document for TELECON 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company;" the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer 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.

Letter Number: 817A00001256

Dionne M Scott Regulatory Specialist II

2017 JUL -7 AN (S. O.) SECHETARY CHANGE ALLAHASSEE, FLORIDE

	,	cov	ER LETTER	
	istration Section ision of Corporation	as		
or o recer	TELECON, LLC	of flouds	LLC	
SUBJECT:	-73	Name of I	imited Liability (Company
The enclosed Existence, ar	l "Application by For ad check are submitte	reign Limited Liability Comp ed to register the above refere	oany for Authoriza enced foreign limit	ation to Transact Business in Florida," Certificate of ted liability company to transact business in Florida.
Please return	all correspondence of	concerning this matter to the	following:	
	TANIA THON	1PSON		
		N	ame of Person	
	TELECON, LI	C		
		Fi	rm/Company	
	813 CRESTWI	ELL CIR SW		
			Address	
	ATLANTA, G	A 30331		
		City/S	tate and Zip Code	
	TANIA_TH200	з@ҮАНОО.СОМ		
		E-mail address: (to be used	d for future annua	report notification)
For further in	nformation concerning	ng this matter, please call:		
TA	NIA THOMPSON		678 at (761-5558
	Name o	of Contact Person	Area Code	Daytime Telephone Number
Div Reg P.O Tal	ision of Corporation sistration Section D. Box 6327 lahassee. FL 32314 a check for the follow 5125.00 Filing Fee	s	□ \$155.00 Fifa	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	2	Certificate of Status	Certified Copy	of Status & Certified Cupy

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

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTEX, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

1. TELECON, LLC	Limited Lishility Company, must include "Lim	nited Liability Company," "L. L. C.," or "LLC")			
TELECON OF FLORI	·	, ,			
		Florida. The alternate name must include "Limited Lisbal	ity Company," "L.L.C," or "LLC ")		
a TEXAS		3. 81-1036876			
	nich foreign limited liability company is organized)	(UE) number	(FEI number, if applicable)		
4. JANUARY 1, 2017					
	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605 0905, F.S. to dete	to registration) ermine penalty liability)			
5. 14278 SOUTHERN R	ED MAPLE OR 12.	6. 813 CRESTWELL CIR SW			
ORLANDO: 11, 3282	_	(Mailing Address) ATLANTA, GA 30331			
	CII Cia S.D. ATL Ga 3033				
7. Name and street address	ss of Florida registered agent: (P.O. B	ox NOT acceptable)			
Name:	PATRICIA HAMILTON				
Office Address:	3040 CHAPIN PASS				
	ODESSA	Florida 33556 (Zip code)			
Registered agent's accep	(City)	(Zip code)			
	(Registered agen	•			
 The name, title or cap: <u>Title or Capacity:</u> 	acity and address of the person(s) who Name and Address:	has/have authority to manage is/are: <u>Title or Capacity:</u>	Name and Address		
PRESIDENT	TANIA THOMPSON				
 	813 CRESTWELL CIR SV	<u> </u>			
	<u>ATLANTA, GA 30331</u>				
(Use attachments if neces	sary)	<u></u>	52		
9. Attached is a certificate jurisdiction under the law of the translator must be st	of which it is organized, (if the certific	d, duly authenticated by the official hav cate is in a foreign language, a translatic	ing custody of records in the on of the certificate under oath		
10. This document is execute submitted in a document to	uted in accordance with section 605.92 the Department of Stare constitutes a	203 (1) (b), Florida Statutes, I am aware third degree felony as provided for in s.	that any false information 817.155, F.S.		
,	X Signar	trace of an authorized person			
	v				
	TANIA THOMPSON	d or printed name of signee			

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



Office of the Secretary of State

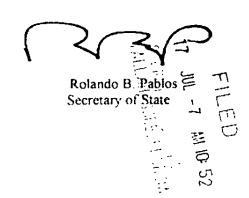
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Telecon LLC (file number 802292693), a Domestic Limited Liability Company (LLC), was filed in this office on September 15, 2015.

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 January 06, 2017.





Phone: (512) 463-5555 Prepared by: SOS-WEB

Come visit us on the internet at http://www.sos.state.tx.us Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 707499790003