11700006954

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200302289592

17 AUG 14 PH 4: 24

7 AUS 14 AM 9 TO 7 AUS 14 AM 9 TO 7 AUS 14 AM 9 TO 7 AUS 15 AM 9 TO 7 AUS 15 AU

D. SCOTT AUG 1 5 2017 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 758831 7976978

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : August 8, 2017

ORDER TIME : 3:58 PM

ORDER NO. : 758831-001

CUSTOMER NO: 7976978

FOREIGN FILINGS

NAME: XSTELE.COM, LLC

XS TELECOM OF FLORIDA, 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:

COVER LETTER

· TO: Registration Section

Division of Corporations						
SUBJECT: Xstele.Com, LLC						
Name of Limited Liability Company						
The enclosed "Application by Foreign Limited Liabilit Existence, and check are submitted to register the above	y Company for Authoriza re referenced foreign limit	ation to Tra ited liabilit	ansact Business in Florida." Certificat y company to transact business in Flo	te of orida		
Please return all correspondence concerning this matter	r to the following:					
Edward F. phillips						
	Name of Person					
XSTELE.LO	MILL					
Firm/Company						
332 W.Lee Hwy., #263						
Address						
Warrenton, VA, 20186						
	City/State and Zip Code	 -				
ephillips@xstele.com						
E-mail address: (to	be used for future annua	Героп по	ification)			
For further information concerning this matter, please of	rall:					
Edward Phillips Name of Confact Person	at (<u>540</u> Area Code		5 - 2180 time Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section			
Enclosed is a check for the following amount: \$\Begin{array}{c} \$125.00 \text{ Filing Fee} & \Begin{array}{c} \$130.00 \text{ Filing Fee} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		•	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy			

FILED
7 AUG 14 AM 9 TO

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. Xstele.Com, LLC						
Xs Telecom of Flori	reign Limited Liability Company; must include "!da, LLC	Limited Liability Company, "L.L.C.," or "LI	.C.*)			
(If name unavailable, enter alter	mate name adopted for the purpose of transacting business	s in Florida. The alternate name most include "Limite	d Liability Company "" 1 C "or "LC ")			
2. Virginia		3 46-501	3 ill			
(Jurisdiction under the las	w of which foreign limited hability company is organized;	3. <u>46-501</u>	number, if applicable)			
4. 07-01-2017						
	(Date first transacted business in Florida, if p (See sections 605,0904 & 605,0905, F.S. to a	nor to registration) determine penalty liability)				
5. 332 W.Lee Hwy.,		6. 332 W.Lee Hwy., #26	3			
(Street Address of Principal Office) Warrenton, VA, US, 20186		(Mailing	(Mailing Address) Warrenton, VA, US, 20186			
		varietion, va, us, 2	<u> </u>			
						
7. Name and street ac	Idress of Florida registered agent: (P.O.	Box NOT acceptable)				
	Corporation Service Compan	-				
Name:		<u>y</u>				
Office Addre	ss: 1201 Hays Street					
	Tallahassee	, Florida <u>32301</u>				
Registered agent's ac	(City)	(Zij	code)			
	as registered agent and to accept service	e of process for the above stated lim	ited lighility company at the place			
designated in this app to comply with the pro	dication, I hereby accept the appointme ovisions of all statutes relative to the pro- tions of my position as registered agent.	ent as registered agent and agree to oper and complete performance of t	act in this capacity. I further agree ny duties, and Lum familiar with			
ana accept the omigu	nons of my position as registered agent. 14		Melissa Zender			
	- I Charles	- July	Asst. Vice President			
0.20.		to posture				
Title or Capacity	capacity and address of the person(s) wh Name and Address:	no has/have authority to manage is/ar <u>Title or Capacity:</u>				
		rite or Capacity.	Name and Address:			
Edward Phy Managing Me	11 263 Value	<u></u>				
Manezing Me	moce Vigioin Zoixie					
	· ·					
						
						
(Use attachments if ne	ecessary)		걸음 -			
urisaiction under the I	cate of existence, no more than 90 days (aw of which it is organized. (If the certil	old, duly authenticated by the official ficate is in a foreign language, a trans	having custody of records in the lation of the certificate under oath			
of the translator must b	e submitted)		2000年四			
	Ed the					
	Sign	inture of an authorized person				
0. This document is e	xecuted in accordance with section 605.0	0203 (1) (b), Florida Statutes, I am av	vare that any false information			
оонисси и а досите	nt to the Department of State constitutes	a unito degree telony as provided for	in s.817.155, F.S. 3.*			
	Edward Phillips					

Typed or printed name of signee

Common brealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That XSTELE.COM, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

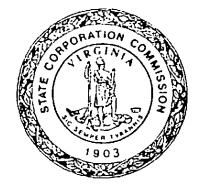
That the date of its organization is March 4, 2014; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

THEO THEO

Signed and Sealed at Richmond on this Date: July 31, 2017



Joel H. Peck, Clerk of the Commission