

# M17000008328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

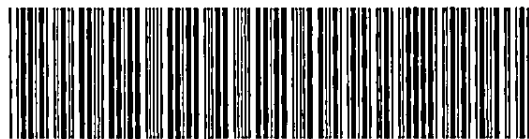
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

name  
W17-73462

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09/07/17--01021--017 \*\*160.00

DIVISION OF REVENUE

17 SEP 28 AM 10:14

FILED

Q SIMMONS

SEP 29 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 13, 2017

TRAVIS WHEELER  
PO BOX 186  
BRISTOL, TN 37621

SUBJECT: TELCOM, LLC  
Ref. Number: W17000073462

We have received your document for TELCOM, 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):

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.

The document number of the name conflict is K75088.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 717A00018608

2017 SEP 28 AM 11:15  
SEP  
11:15 AM  
2017

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Telcom, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Travis Wheeler  
Name of Person

Telcom, LLC  
Firm/Company

PO Box 186  
Address

Bristol, TN 37621  
City/State and Zip Code

mary@marklandllc.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Markland at ( 423 ) 968-1597  
Name of Contact Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. Telecom, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  
Telecom Southeast, 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.")
2. TN  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 30-01690966  
(FEI number, if applicable)
4. September 18, 2017- anticipated  
(Date first transacted business in Florida, if prior to registration.  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability))
5. 2889 Hwy 11W  
(Street Address of Principal Office)
6. P.O. Box 186  
(Mailing Address)
- Blountville, TN 37617 Bristol, TN 37621

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: URS Agents, LLC  
Office Address: 3458 Lakeshore Drive  
Tallahassee, Florida 32312  
(City) (Zip code)

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 comply with 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 agent.

URS Agents, LLC by: Christian Eubanks  
(Registered agent's signature) Christian Eubanks, Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
<u>Managing Member</u>	<u>Travis Wheeler</u> <u>2889 Hwy 11W</u> <u>Blountville, TN 37617</u>		

(Use attachments if necessary)

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 foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

Travis L. Wheeler  
Signature of an authorized person  
Travis L. Wheeler  
Typed or printed name of signer

FILED  
17 SEP 28 AM 10:11  
DIVISION OF CORPORATE & BUSINESS SERVICES



**Tre Hargett**  
Secretary of State

**Division of Business Services**

**Department of State**

State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

**TRAVIS WHEELER**  
PO BOX 186  
BRISTOL, TN 37621

September 5, 2017

**Request Type: Certificate of Existence/Authorization**  
Request #: 0249645

Issuance Date: 09/05/2017  
Copies Requested: 1

**Document Receipt**

Receipt #: 003561054 Filing Fee: \$20.00  
Payment-Credit Card - State Payment Center - CC #: 3710330096 \$20.00

**Regarding:** **Telcom, LLC**  
**Filing Type:** Limited Liability Company - Domestic  
**Formation/Qualification Date:** 05/24/2011  
**Status:** Active  
**Duration Term:** Perpetual  
**Business County:** SULLIVAN COUNTY

**Control #:** 659440  
**Date Formed:** 05/24/2011  
**Formation Locale:** TENNESSEE  
**Inactive Date:**

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**Telcom, LLC**

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

Processed By: Cert Web User

Verification #: 024003519