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COVER LETTER

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Registration Section Division of Corporations

TO:

SUBJECT:	LAKEVIEW WIRE	LESS LLC						
SOBJECT.		Name of Limited Liability Company						
					ansact Business in Florida," Certificate y company to transact business in Flor			
Please retun	all correspondence	concerning this matter to the	following:					
	LEGAL COM	PLIANCE DEPT						
	-	N:	ame of Person		······································			
	LAKEVIEW V	VIRELESS LLC						
		Fi	rm/Company					
	3000 ALTAMESA BLVD. STE 300 Address FORT WORTH TX 76133							
	. , . , .,	City/S	tate and Zip Cod	e				
	legal@cellularw							
		E-mail address: (to be used	for future annu	al report no	tification)			
For further i	nformation concerning	g this matter, please call:						
LE	GAL COMPLIANCI	Ξ	817 at (921-92	00			
_	Name o	of Contact Person	Area Cod	e Day	rtime 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						
	a check for the follow \$125.00 Filing Fee	ring amount: S130.00 Filing Fee & Certificate of Status	☐ \$155.00 Fill 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:

(Date first transcered bounces in Florida, if proof to registration (See sections 663 0904 x 605.0905, F.S. to determine penalty labelity) 5. 3000 ALTAMESA BLVD. SUITE 300 (Since Address of Phonepa) Office) FORT WORTH TX 76133 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: URS AGENTS. LLC Office Address: 3458 LAKESHORE DRIVE TALLAHASSEE (City) TALLAHASSEE (Florida 32312 (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 designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I fair out of comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am family and accept the obligations of my position as registered agent. Amy Purdy, Assistant Secretary Title or Capacity: Name and Address: Title or Capacity: Name and Address 3000 ALTAMESA BLVD FORT WORTH TX 76133 (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 reconturisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate of the translator must be submitted)	LAKEVIEW WIRELE	SS LLC			
TEXAS (Darediction under the law of which foreign limited lability company is organized) (Chee sections 650 9904 & 605,9905, P.S. to determine penalty lability) (See sections 650 9904 & 605,9905, P.S. to determine penalty lability) (See sections 650 9904 & 605,9905, P.S. to determine penalty lability) (See sections 650 9904 & 605,9905, P.S. to determine penalty lability) (Surger Address) FORT WORTH TX 76133 (Name and street address) FORT WORTH TX 76133 FORT WORTH TX 76133 (City) (Name: URS AGENTS, LLC Office Address: 3458 LAKESHORE DRIVE TALLAHASSEE (City) (Ci	(Name of Foreign	Limited Liability Company; must include "Lim	nited Liability	Company," "L.L.C.," or "LLC.")	
2. TEXAS (Junsdiction under the law of which foreign limited liability company is organized) 4. (Date first transacted business in Florida, if prior to respiration.) (See sections 605 POOL & 605,0905, F.S. to determine penalty liability) 5. 3000 ALTAMESA BLVD, SUITE 300 (Sircel Address of Principal Orfice) FORT WORTH TX 76133 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: URS AGENTS, LLC Office Address: TALLAHASSEE (City) TALLAHASSEE (City) (City	(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in	Florida The alte	emate name must include "Limited Liah	vility Commany " "L. L. C." or "L. L. C.")
(Introduction under the law of which foreign limited liability company, is organized) 4. (Date first transacted business in Florida, if prior to repairmon) (New sections 663 0904 & 663,0405, F.S. to determine penalty liability) 5. 3000 ALTAMESA BLVD, SUITE 300 [Sirea Address of Principal Office) FORT WORTH TX 76133 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: URS AGENTS, LLC Office Address: 3458 LAKESHORE DRIVE TALLAHASSEE (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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fut occumply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familian accept the obligations of my position as registered agent. Amy Purdy, Assistant Secretary (Plaintered agent's signature) 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: Title or Capacity: Name and Address: MANAGER DAVID SHANKS 3000 ALTAMESA BLVD FORT WORTH TX 76133 (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 reconsurrisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate of the translator must be submitted)		and adopted to the purpose of transacting outsides in			miny company, into, in more, y
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10 Per		TOPHI	•		
Signature of an authorized person		Signat	ure of an authori	zed person	

Typed 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 LAKEVIEW WIRELESS, LLC (file number 801861383), a Domestic Limited Liability Company (LLC), was filed in this office on October 03, 2013.

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 October 05, 2017.





Rolando B. Pablos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/
Phone: (512) 463-5555 Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services