Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : 120020000144 : (305)520-2344

: (305)520-2400 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address pleaser.

Email Address:_

Foreign Limited Liability Company Florida DispatchCo LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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Corporate Filing Menu

Help

COVER LETTER

SUBJECT: Florida Dispato	Name of Limited Liability Company
The enclosed "Application by Foreign Limited Existence, and check are submitted to register	d Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning th	his matter to the following:
Jessica Pere	Z
	Name of Person
	Firm/Company
2855 Le Jeur	ne Rd., 4th Floor
	Address
Coral Gables	s, FL 33134
	City/State and Zip Code
jessica.perez	ddress: (to be used for future annual report notification)
For further information concerning this matter	
Jessica Perez	at (305) 520-2366 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
	amount: 0 Filing Fee &

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

IN COMPLIANCE WIT	TH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBM IABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIL	AITTED TO REGISTER A
<i>FOREIGN ШМПЕГЛ</i> _{L.} Florida Dispate		
(Name of For	reign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	·"I.I.C.")
Liability Company," "L.L.C	alternate name adopted for the purpose of transacting business in Florida. The alternate na C." or "LLC.")	ame must include "Limited ,
_{2.} Delaware	3. (FEI number, if applies	3-1-3
(Jurisdiction under the la company is organized)	the contract total of the contract to the cont	inic)
4,	(Date first transacted business in Florida, if prior to registration.)	
	(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
_{5.} 7150 Philip	s Hwy	
Jacksonvill	e, FL 32256	
	(Street Address of Principal Office)	
_{6.} 2855 Le Je	une Rd., 4th Floor	<u></u>
Coral Gable	es, FL 33134	
	(Mailing Address)	
7. The name, title o	or capacity and address of the person(s) who has/have authority to m	anage is/are;
Robert Ledoux (V	P,S) and Jay Westbrook (GM) at 7150 Philips Hwy, Jackson	ville, FL 32256
Myles Tobin (VP) a	and Patrick Goddard (VP)at 2855 Le Jeune Rd, 4th Floor, Coral G	ables, FL 33134
Melissa Wester	rman (VP, T) at 7411 Fullerton St, Ste 100, Jacksonvi	lle, FL 32256
having custody of reacceptable. If the cermust be submitted)	rificate of existence, no more than 90 days old, duly authen ecords in the jurisdiction under the law of which it is organized. (A pertificate is in a foreign language, a translation of the certificate under the certificate under the certificate under the certificate under the signature of an authorized person of this document constitutes an affirmation under the penalties of perjurimation submitted in a document to the Department of State constitutes a third degree futions as provided.	r oath of the translator
	Robert Ledoux, Secretary	Trans.
	Typed or printed name of signee	Fit you get
		ယ္

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
Florida DispatchCo LLC
If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Myles Tobin		15	201	
(Name)			7 (E	Salas V. Ar E. J.
2855 Le Jeune Rd., 4th Floor		. j.	<u> </u>	terment Terment E
Florida Street Address (P.O. Box NOT ACCEPTABLE)			₩ }	\$
Coral Gables	FL 33134	• tms	က်	
	City/State/Zip	<u> </u>	2.D	

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 certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

S 100,00 Filing Fee for Application
S 25.00 Designation of Registered Agent
S 30.00 Certified Copy (optional)
S 5.00 Certificate of Status (optional)

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FLORIDA DISPATCHCO LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE REGORDS OF THIS OFFICE SHOW, AS

OF THE FIFTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLORIDA DISPATCHCO LLC" WAS FORMED ON THE SECOND DAY OF DECEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

-



Authentication: 203348425

Date: 10-05-17