Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007

Phone : (702)866-2500

Fax Number : (702)866-2689

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

Foreign Limited Liability Company Southern Cell Services LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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S. WARREN

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Corporate Filing Menu

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COVER LETTER

	distration Section		
SUBJECT:			<u> </u>
Name of Limited Liability Company			
The enclosed Existence, a	l "Application by Foreign Limited Liability Compand check are submitted to register the above referen	iny for Authorization to Tra need foreign limited liability	insact Business in Florida," Certificate of v company to transact business in Florida.
Please return	all correspondence concerning this matter to the fe	ollowing:	
	Jennifer Sharp		
Name of Person			
	InCorp Services, Inc.		
Firm/Company			
	3773 Howard Hughes Pkwy Suite 500S		
	Address a fig.		
	Las Vegas, NV 89169-6014		
	City/Str	etc and Zip Codc	
	documents@incarp.com		
	E-mail address: (to be used	for future annual report no	ification)
For further i	nformation concerning this matter, picase call:	, •	
Jennife	or Sharp on behalf of InCorp Services, Inc.	702-866-2500	
	Name of Contact Person	Area Code Day	rtime Telephone Number
Dis Rep P.C	ALLING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahasace, FL 32314	Division Registrat Clifton B 2661 Eac	CADDRESS: of Corporations ion Section tuilding ecutive Center Circle sec, FL 32301
	a check for the following amount: \$125.00 Filing Fee \$\sum \text{Certificate of Status}\$	S155.00 Filing Fce & Certified Copy	☐ \$160.00 Piling Pee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FUREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF PLORIDA: 1. Southern Cell Services LLC (Name of Persign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") SCS LLC (If name may aliable, once alternate name adopted for the pyrpore of transacting business in Plurida. The aliamete name most include "Unrited Liability Company," "LLC," or "LLC," or 3, 82-2775262 (Jurisdiction under the law of which foreign limited fiebility company is expenized) (FBI number, il eppiloshia) Upon Registration 6, 770 Old Roswell Place Suite B400 5. 770 Old Roswell Place Suite B400 (Street Address of Principal Office) (Malling Address) Roswell, GA 30076 Roswell, GA 30076 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) InCorp Services, Inc. Name: 17888 67th Court North Office Address: Loxahatchee (CIIV) 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. Jennifer Sharp on behalf of Incorp Services, Inc. (Chaptered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address; Title or Capacity: Name and Address: Title or Capacity: Patrick Duffy Member 770 Old Roswell Place Suite B400 Roswell, GA 30076 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authentifiated 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 ᇙ 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 \$.817.155, F.S.

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Typed ar printed name of signee

Patrick Duffy

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Control Number: 17097511

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

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CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Southern Cell Services LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transport business in this state.

Docket Number : 15145803
Date Inc/Auth/Filed: 09/13/2017
Jurisdiction : Georgia
Print Date : 01/19/2018

Form Number ; 211



Brian P. Kemp Secretary of State