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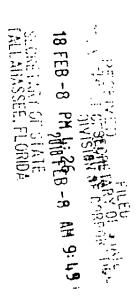
(Requestor's Name)						
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(Business Entity Name)						
(Document Number)						
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Account#: I20000000088

Date: February 8, 2018
Name: Marisa Kugelmann
Reference #: L103613
Entity Name: CONNECTIVITY WIRELESS, LLC
✓ Articles of Incorporation/Authorization to Transact Business
☐ Amendment — Cocond*
☐ Change of Agent ★ File Second*
Reinstatement
Conversion
Merger Merger
☐ Dissolution/Withdrawal
☐ Fictitous Name
Other Certified Copy and Certificate of Status upon filing
Authorized Amount: \$1100.00 Signature: Mai Ald Z
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G CORPORATE HO COGENCY GLOBALING, 10 E 46 - 51, 10 I FL NY, NY 16016

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TO:

Registration Section

COVER LETTER

Div	ision of Corporation	S								
SUBJECT:	Connectivity Wireless, LLC									
Bond Be 1.	Name of Limited Liability Company									
The enclosed Existence, as	1 "Application by For id check are submitted	eign Limited Liability Comp d to register the above refere	any for Authorizat nced foreign limit	tion to Trai ed liability	nsact Business in Florida," Certifica company to transact business in Flo	ite of orida.				
Please return	all correspondence c	oncerning this matter to the	following:							
	V. Rose Mercei	, Paralegal								
	Name of Person									
	McGuireWoods LLP									
	Firm/Company									
	2000 McKinney Avenue, Suite 1400									
Address										
	Dallas, Texas 75201									
City/State and Zip Code										
	rmercer@meguir									
E-mail address: (to be used for future annual report notification)										
For further i	nformation concerning	g this matter, please call:								
V.	Rose Mercer, Paraleg	al	469 at (372-390						
	Name o	f Contact Person	Area Code	Day	time Telephone Number					
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassec, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		of Corporations on Section uilding cutive Center Circle						
	a check for the follow \$125.00 Filing Fee	ing amount: \$\Bigsize \\$130.00 \text{ Filing Fee & Certificate of Status}\$	☐ \$155.00 Filin Certified Copy	g Fee &	■ \$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. Connectivity Wireless, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Georgia (FEI number, if applicable) (Jurisdiction under the Liw of which foreign limited liability company is organized) (Date lirst transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 2707 Main Street, Suite I 2707 Main Street, Suite 1 (Street Address of Principal Office) (Mailing Address) Duluth, Georgia 30096 Duluth, Georgia 30096 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CORPORATION SERVICE COMPANY Name: 1201 HAYS STREET Office Address: , Florida 32301 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 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 Holly Jones and accept the obligations of my position as registered agent. Assistant Vice President 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Name and Address: .. Title or Capacity: Title or Capacity: CEO Greg Jacobs 2707 Main Street, Suite Duluth, Georgia 30096 Connectivity Wireles (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. Signature of an adthorized person

Typed or printed name of signer

Greg Jacobs Chief Executive Officer

Control Number: 08020422

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE



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

CONNECTIVITY WIRELESS, 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 transact business in this state.

Docket Number : 15281572 Date Inc/Auth/Filed: 03/11/2008 Jurisdiction : Georgia Print Date : 02/07/2018

Form Number : 211



B: P. W.

Brian P. Kemp
Secretary of State

COVER LETTER

		ation Section of Corporation	s							
SUBJEC		mectivity Wireles								
			Name of L	imited Liability C	Company					
The enclo	osed "Aj e, and ch	oplication by Fore seck are submitted	eign Limited Liability Comp I to register the above refere	any for Authorizaticed forcign limit	tion to Trar ed liability	nsact Business in Florida," Certificate of company to transact business in Florida.				
Please re	turn all o	correspondence c	oncerning this matter to the	following:						
		V. Rose Mercer	, Paralegal							
	Name of Person									
	McGuireWoods LLP									
	Firm/Company									
	2000 McKinney Avenue, Suite 1400									
				Address						
	Dallas, Texas 75201									
			City/St	ate and Zip Code						
rmercer@meguirewoods.com										
	-	E-mail address: (to be used for future annual report notification)								
For furth	er inform	nation concerning	g this matter, please call:							
V. Rose Mercer, Paralegal		469 _ at (372-390							
		Name o	f Contact Person	Area Code	Dayt	ime Telephone Number				
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			ADDRESS: of Corporations on Section pilding cutive Center Circle ce, FL 32301							
Enclosed		eck for the follow .00 Filing Fee	ing amount: \$\Bigsigmu \text{\$\Sigmu}\$130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Filin Certified Copy	g Fee &	■ \$160.00 Filing Fee, Certificate of Status & Certified Copy				