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Account#: 120000000088

Date:	8/10/2018	F	(CCOUNT#. 1200000000000
Name:	Chris Vick		
Reference #:	B105700		
Entity Name:	CENTRAL STAT	TES TOWER IV, LLC	
Articles of	Incorporation/Authoria	zation to Transact Business	3
Amendme	ent		
Change of	f Agent		
Reinstater	ment		
Conversion	าก		
Merger			
Dissolution	n/Withdrawal		
☐ Fictitous N	lame		
Other			
Authorized Ar Signature:	mount:	#125	

@ CORPORATE HQ

COGENCY GLOBAL INC. 10 E 40" ST, 10 1 FL NY, NY 10016 800.221.0102 +1.212.947.7200

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COGENCY GLOBAL (HK) HMITED A HONG KONG LIMITED COMPANY INFINITUS PLAZA, 1215 FL 199 DES VOEUX RD CENTRAL HONG KONG +852.3975.1803



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

## 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: CENTRAL STATES TOWER IV, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "[LLC.," or "LLC.") (If name unavailable, only alternate name adopted for the purpose of transacting hasiness in Florida. The atternate name must include "Limited Liability Company," "LLC," or "ITC.") 82-3699589 Delaware (Jurisdiction under the law of which foreign limited hability company is organized) Upon date filed with Florida Secretary of State (Date first transacted business in Florida, if prior to registration.) (See sections 603,0904 & 605,0905, F.S. to determine penalty liability) 323 S Hale St., Ste 100 323 S Hale St., Ste 100 (Mailing Address) (Street Address of Principal (Mike) Wheaton, IL 60187 Wheaton, IL 60187 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) COGENCY GLOBAL INC. Name: 115 North Calhoun Street, Suite 4 Office Address: Tallahassee , Florida 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. 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: William Wade President CEO **Brian Meler** 1508 Keim Cl 983 SL HL 25 Oawego, N. 60543 (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 at third degree felony as provided for in s.817.155, F.S. Signature of an authorized person

Brian P Meier
Typed or printed name of signer

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CENTRAL STATES TOWER IV, 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 RECORDS OF THIS

OFFICE SHOW, AS OF THE TENTH DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTRAL STATES TOWER IV, LLC" WAS FORMED ON THE THIRTEENTH DAY OF NOVEMBER, A.D. 2017.

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

at corp delaware soy/auth

Authentication: 203230494

Date: 08-10-18