9/19/2018

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

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Foreign Limited Liability Company InfraStrategies LLC

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Help

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

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

InfraStrategies LL			
(Name of Foreign	Limited Liability Company, must include 'Limited	Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate is	nine adopted for the purpose of transiering business in Hori		hty Company,""Lat. C., or "LEC.")
2 Delaware	uch loreign limited liability company is organized)	3. 82-4352111	a, il applicable)
(Jurisdiction under the law of wi	net foreign fulnies training condens, is referenced	(, <u>2, , , , , , , , , , , , , , , , , , </u>	,
4		and trading t	
	(Date first transacted business in Florida, if prior to r (See sections 605 cr304 & 605 0305, F.S. to determine		_
5. 3030 N. Rocky Po	oint Dr.	6. 3030 N. Rocky Point	
(Street Address of) STE 150A	Principal Office)	STE 150A	•••
Tampa FL 33607		Tampa FL 33607	
Tampa L 33007			N. S.
~	ss of Florida registered agent: (P.O. Box	NOT acceptable)	2018 SEP SECRETA
7. Name and street address			# 4 1
Name:	Northwest Registered Agent,		AR ISS
Office Address:	3030 N. Rocky Point Dr. STE	150A	
•	Tampa	, Florida 33607	
	(City)	Zip code	9: 1 STALL LOR
Registered agent's accep	otance:	Conthousand stated limited	liability company at the place
Having been named as re	stance: egistered agent and to accept service of p ation, I hereby accept the appointment a	provess for the above stated united is registered agent and derive to act :	in this canacity. I further agree
designated in this applica	ition, I hereby accept the appointment a tions of all statutes relative to the proper	and complete performance of my o	luties, and I am familiar with
to comply with the provis and accept the obligation	is of my position as registered agent.		
.,	Ton Glove		
	(Registered agent's	vignoture)	
tilla or one	acity and address of the person(s) who ha	as/have authority to manage is/are:	
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Jeffrey Boothe		
Williages	3030 N. Rocky Point Dr STE 150A	_	
	Tampa Ft 33607	_	
		-	
(Use attachments if nece	ssary)		
·	e of existence, no more than 90 days old,	duly authenticated by the official ba	eving custody of records in the
9. Attached is a certificat	e of existence, no more than 50 days ord; of which it is organized. (If the certifica	te is in a foreign language, a translat	ion of the certificate under oath
of the translator must be	submitted)		
TO TOUR TO A SECURE SERVICE	cuted in accordance with section 605,020	(3.11) (b) Florida Stanites, I am awa	re that any false information
submitted in a document	to the Department of State constitutes a th	hird degree felony as provided for in	s.817.155, F.S.
34777777			
	Signatu	e of an authorized person	
	Morgan Noble		
	Typed o	or printed name of signee	

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "INFRASTRATEGIES 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 NINETEENTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INFRASTRATEGIES LLC" WAS FORMED ON THE SIXTH DAY OF FEBRUARY, A.D. 2018.

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

Authentication: 203453211

Date: 09-19-18

6746110 8300 SR# 20186735354