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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 MassComm, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, onter alternate name adopted for the parpose of transacting business in Florida. The alternate name anast include "Limited Labelity Company," "LLC," or "LLC.") New York 2 83-2381119

2	New York		3. 83-23	81119		
- .	(Jurisdiction under the law of wh	ich foreign limited liability company is organozed)	· ·	(FEI number, if ap	oplicable)	• •
4.	October 26, 2018				_	
	·	(Date first transacted business in Florida, if pro- (See sections 603 0904 & 603 0905, F.S. to det			- ,	
5.	4001 N. Rodney Parha	m Rd.	6	(Maring Address)		•
	(Struet Address of T Little Rock, AR 72212		•	(waning wom car)	1018	·
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	, <u></u>				22	
7.	. Name and street addres	s of Florida registered agent: (P.O. B	lox <u>NQT</u> acceptat	ple)	B	-71
	Name:	C T Corporation System			SUCE PH	[]
	Office Address:	1200 South Pine Island Road	··			
		Plantation		, Florida 33324		•^

(City)

(Zin code)

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.

By:	C T Corporation System	- Jen Zario
	[Registered agent's	(agointure)

 The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address; Title or Capacity:

Title or Capacity:	Name and Address:	<u>Title or Capacity:</u>	Name and Address:	
Manager	Tony Thomas 4001 N. Rodney Parham Rd. Little Rock, AR 72212	Manager	Kristi Moody 4001 N. Rodney Parham Rd. Little Rock, AR 72212	
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(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, E.S.

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					 Si	mater	of	an authorize	d person

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Michelle Simpson, Vice President and Assistant Corporate Secretary

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State of New York Department of State } ss:

I hereby certify, that MASSCOMM MERGER SUB, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/25/2018, and that the Limited Liability Company is existing so far as shown by the records of the Department. I Further certify the following:

A Certificate of Merger and Name Change, changing its name to MASSCOMM, TLC was filed on 10/26/2018.

I further certify, that no other documents have been filed by such limited liability. Company.



* * *

Witness my hand and the official seal of the Department of State at the City of Albany, this 06th day of November two thousand and eighteen.

Brendan W. Fitzgerald Executive Deputy Secretary of State

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