

**M1900003543**

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 : CAPITOL SERVICES, INC.  
Account Number : 120160000017  
Phone : (855) 498-5500  
Fax Number : (800) 432-3622

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

Email Address: \_\_\_\_\_

**Foreign Limited Liability Company  
TDS TESTING & START-UP SERVICES, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$1,215.00



**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: TDS TESTING & START-UP SERVICES, LLC**

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Lisa Bridges

Name of Person

TDS TESTING & START-UP SERVICES, LLC

Firm/Company

15825 Trinity Blvd

Address

Fort Worth, TX 76155

City/State and Zip Code

lbbridges@tdssolutions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Bridges

817

465-9494

at ( )

Name of Contact Person

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☒ \$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. TDS TESTING &amp; START-UP SERVICES, 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. Texas

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 27-1298964

(FEI number, if applicable)

4. 11/13/2015

(Date first transacted business in Florida; if prior to registration,  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 15825 Trinity Blvd

(Street Address of Principal Office)

Fort Worth TX 76155

6. 15825 Trinity Blvd

(Mailing Address)

Fort Worth TX 76155

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Capitol Corporate Services, Inc.

Office Address: 515 E. Park Ave., Floor 2

Tallahassee

(City)

32301  
Florida

(Zip 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.



(Registered agent's signature)

Kim Tadlock, Asst Sect on behalf of  
Capitol Corporate Services, Inc.



8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Name and Address:

☐ Manager Name: Lisa Bridges

☐ Member Address: 15825 Trinity Blvd

☒ Authorized Fort Worth TX 76155

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: David Zabetakis

☐ Member Address: 15825 Trinity Blvd

☒ Authorized Fort Worth TX 76155

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

Title or Capacity: Name and Address:

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: Becki Fisher

☐ Member Address: 15825 Trinity Blvd

☐ Authorized Fort Worth TX 76155

Person 817-465-9494

☒ Other Accounts Payable ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

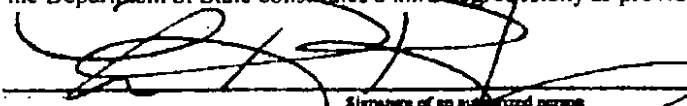
Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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 authorized person

LISA R. BRIDGES  
\_\_\_\_\_  
Typed or printed name of signer



Corporations Section  
P.O. Box 13697  
Austin, Texas 78711-3697



David Whitley  
Secretary of State

## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for TDS TESTING & START-UP SERVICES, LLC (file number 801193274), a Domestic Limited Liability Company (LLC), was filed in this office on November 12, 2009.

It is further certified that the entity status in Texas is in existence.

FILED  
2019 APR - 8 P 4: 52  
TALLAHASSEE, FLORIDA  
OFFICE OF THE SECRETARY OF STATE

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 08, 2019.



A handwritten signature in black ink, appearing to read "David Whitley".

David Whitley  
Secretary of State