

6/5/2019

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (514)280-3338
Fax Number : (954)208-0845

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

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Foreign Limited Liability Company Netspeed LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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JUN 06 2019

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. NETSPEED LLC

(Name of foreign limited liability company; must include "Limited Liability Company," "LLC," or "LLP")

(If name unavailable, must alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLP")

2. NEW YORK

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

3.

(FEI number, if applicable)

4. UPON REGISTRATION

(Date first transacted business in Florida, if prior to registration;
(See sections 605.0501 & 605.0503, F.S. to determine penalty liability.)

5. 50 METHODIST HILL DRIVE SUITE 650

(Street Address of Principal Office)

ROCHESTER NY 14623

6. 50 METHODIST HILL DRIVE SUITE 650

(Mailing Address)

ROCHESTER NY 14623

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

Florida 33324

(City)

(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.

By:

C T Corporation System

ANN J. WILLIAMS

Special Assistant Secretary

8. 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:

Name and Address:

MGR

FRANK CHIAINO

MGR

TOM PERRONE

50 METHODIST HILL DR. STE 650
ROCHESTER NY 14623

50 METHODIST HILL DR. STE 650
ROCHESTER NY 14623

MGR

LARRY COLEMAN

STE 650

50 METHODIST HILL DR.
ROCHESTER NY 14623

(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.817.135, F.S.

Signature of an authorized person

Thomas A. Perrone

Typed or printed name of signer

**State of New York
Department of State } ss:**

I hereby certify, that NETSPEED LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/14/2016, 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 Publication of NETSPEED LLC was filed on 09/13/2016.

A Certificate of Amendment was filed on 01/27/2017.

A Certificate of Amendment was filed on 11/02/2017.

A Biennial Statement was filed 07/09/2018.

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 03rd day of June
two thousand and nineteen.



A handwritten signature in black ink, appearing to read "Whitney Clark".

Whitney Clark
Deputy Secretary of State