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Office Use Only

Z BROWN JUN 2 5 2019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : I2000000195 REFERENCE : 819388 4304512 AUTHORIZATION : June Cost LIMIT : \$ 125.00

- ORDER DATE : June 24, 2019
- ORDER TIME : 1:55 PM
- ORDER NO. : 819388-005
- CUSTOMER NO: 4304512

## FOREIGN FILINGS

NAME: MONROE CABLE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

## 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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

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

1. Monroe Cable, LLC

Delaware			84-2071787		
(Junsdiettop under the law of which foreign limited liability company is organized)		3.	(FE) number, if applicable)		
	(Due first massacted business in Florids, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registrancen.) ine penalty li	ability)		
2529 Commerce Pa	rkway	6.	2990 Technol	Ogy Drive	
(Street Address of I	rmeipal Office)	_		(Mailing Address)	
North Port, FL 34289-9355			Rochester Hill	s, MI 48309	¥. 4
	<u>.</u>			, , <u>,</u> , ,	
	· · · ·	-			5 5 6 ac
Name and street addres	ss of Florida registered agent: (P.O. Box	: <u>NQT</u> a	cceptable)		
					- " 41"
Name:	Corporation Service Company				
Name.	······				4
Office Address:	1201 Hays Street				
	<b>-</b>			22204	
	Tallahassee		. Florida	32301	

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.

Corporation Service Compa By: ed aren gnature)

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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]:

<u>Title or Capacity:</u>	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: Thomas D'Ovidio	Manager	Name: Scott W. Gage
Member	Address: 222 S. 9th Street, Suite 3130	Member	Address: 222 S. 9th Street, Suite 3130
Authorized	Minneapolis, MN 55402	Authorized	Minneapolis, MN 55402
Person		Person	
Other	Other	Other	Other
Manager	Name:	Manager	Name:
Member	2990 Technology Drive	Member	Address: 2990 Technology Drive
Authorized	Rochester Hills, MI 48309	Authorized	Rochester Hills, MI 48309
Person		Person	
Other	Other	Other	
Manager	Name: Daniel Hutchinson	🗌 Manager	Name:
Member	Address:	Member	Address:
Authorized	Rochester Hills, MI 48309	Authorized	
Person		Person	11/
Other	Other	Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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

Scott W. Gage

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MONROE CABLE, 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 TWENTY-FOURTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MONROE CABLE, LLC" WAS FORMED ON THE TWELFTH DAY OF JUNE, A.D. 2019.

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



Jeffrey W, Bullock, Secretary of State

Authentication: 203086919

Date: 06-24-19

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SR# 20195619708 You may verify this certificate online at corp.delaware.gov/authver.shtml