

4/28/2020

Division of Corporations

H200001237143

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

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

From:

Account Name : CORPORATION SERVICE COMPANY
 Account Number : 120000000195
 Phone : (850)521-0821
 Fax Number : (850)558-1515

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

Email Address: _____

RECEIVED

2020 APR 28 AM 10:20

2020 APR 28 PM 3:15

**Foreign Limited Liability Company
 UNITI COMPLETED TOWERS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UNITI COMPLETED TOWERS 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.

Nicholas R. Alvarez

Name of Person

Kutak Rock LLP

Firm/Company

124 W. Capitol Avenue, Suite 2000

Address

Little Rock, AR 72201

City/State and Zip Code

shannon.karpoff@uniti.com

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

For further information concerning this matter, please call.

Nicholas R. Alvarez

501

975-3130

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

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H20000123714 3**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. UNITI COMPLETED TOWERS LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC")

2. Delaware

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

3. _____
(Tax number, if applicable)4. _____
(Date first transacted business in Florida, if prior to registration;
See sections 605.0904 & 605.0905, F.S. to determine penalty liability)5. 10802 Executive Center Drive

(Street Address of Principal Office)

Benton Building, Suite 300Little Rock, AR 722116. 10802 Executive Center Drive

(Mailing Address)

Benton Building, Suite 300Little Rock, AR 72211

2020 APR 28 PM 2:19

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: Corporation Service CompanyOffice Address: 1201 Hays StreetTallahassee, Florida 32301
(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.

Kadesha Roberson
Corporation Service Company
KADESHA ROBERSON, ASST. VICE PRESIDENT
(Registered agent's signature)

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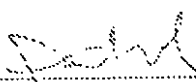
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total].

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Daniel Heard	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 10802 Executive Center Drive	<input type="checkbox"/> Member	Address: _____
<input checked="" type="checkbox"/> Authorized	Benton Building, Suite 300	<input type="checkbox"/> Authorized	_____
Person	Little Rock, AR 72211	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.

Daniel Heard, Manager

Typed or printed name of signer

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Uniti Group Corporate Headquarters
11801 Executive Center Drive
Brentwood, TN 37027
Phone: 615.875.1111
Fax: 615.875.1111

April 13, 2020

Florida Secretary of State
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: *Letter of Affiliation/Consent from Uniti Towers LLC*
DE 12-2-2015

Dear Sir or Madam:

Please accept this letter as acknowledgment by Uniti Towers LLC, a Delaware limited liability company qualified to do business in Florida (M17000008778), that "Uniti Completed Towers LLC," a Delaware limited liability company seeking to submit its application for a certificate of registration of a foreign limited liability company using the name "Uniti Completed Towers LLC" is an entity affiliated with the undersigned and that we hereby consent to the use of the name "Uniti Completed Towers LLC" in its application.

Very truly yours,

UNITI TOWERS LLC

By: 

Daniel Heard, Manager

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Delaware

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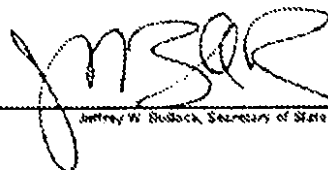
The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNITI COMPLETED TOWERS 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 EIGHTEENTH DAY OF MARCH, A.D. 2020.

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

2020 A.P.R. 28 10:19:32




Jeffrey W. Bullock, Secretary of State

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SR# 20202221294

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

Authentication: 202611096

Date: 03-18-20

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