

M210000010672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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AUG 17 2021

M. SOLOMON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SYMETRY COMMUNICATIONS MATURECO,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:

ED CORR

Name of Person

METRONET

Firm/Company

8837 BOND STREET

Address

OVERLAND PARK, KS 66214

City/State and Zip Code

RACHEL.PAOLILLO@METRONETINC.COM

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

For further information concerning this matter, please call:

ED CORR

913

794-3121

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**

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. SYMETRY COMMUNICATIONS MATURECO 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. DELAWARE 3. 38-4181359
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI 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. 3701 COMMUNICATIONS WAY 8837 BOND STREET
(Street Address of Principal Office) (Mailing Address)
EVANSVILLE, IN 47715 OVERLAND PARK, KS 66214

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

Name: NATIONAL REGISTERED AGENTS INC
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.

(Registered agent's signature)

Kimberly Bowens Assistant Secretary

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TALLAHASSEE, FLORIDA

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: DAN KENNEDY

☐ Member Address: _____

☒ Authorized 3701 COMMUNICATIONS WAY

Person EVANSVILLE, IN 47715

☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:

☐ Manager Name: GRIER RACLIN

☐ Member Address: _____

☒ Authorized 3701 COMMUNICATIONS WAY

Person EVANSVILLE, IN 47715

☐ Other _____ ☐ Other _____

☐ Manager Name: MIKE WHITAKE

☐ Member Address: _____

☒ Authorized 3701 COMMUNICATIONS WAY

Person EVANSVILLE, IN 47715

☐ Other _____ ☐ Other _____

☐ Manager Name: LOHN WEBER

☐ Member Address: _____

☒ Authorized 8837 BOND STREET

Person OVERLAND PARK, KS 66214

☐ Other _____ ☐ Other _____

☐ Manager Name: ED CORR

☐ Member Address: _____

☒ Authorized 8837 BOND STREET

Person OVERLAND PARK, KS 66214

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

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CLERK OF STATE
OFFICE OF THE CLERK OF STATE
DO NOT WRITE IN THESE SPACES

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.

Ed Corr
Signature of an authorized person

ED CORR

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SYMETRY COMMUNICATIONS MATURECO, 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-SIXTH DAY OF JULY, A.D. 2021.



5873201 8300

SR# 20212736745

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203759457

Date: 07-26-21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 1, 2021

ED CORR
METRONET
8837 BOND STREET
OVERLAND PARK, KS 66214

SUBJECT: SYMETRY COMMUNICATIONS MATURECO LLC
Ref. Number: W21000095172

We have received your document for SYMETRY COMMUNICATIONS MATURECO LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon
Senior Section Administrator

Letter Number: 121A00015158

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AUG 16 2021