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## COVER LETTER

Registration Section

TO:

****	Newbridge Wireless, LLC						
	Name of Limited Liability Company						
		y Company for Authorization to Transact Business in Florida." Certificate referenced foreign limited liability company to transact business in Flori					
lease return a	Il correspondence concerning this matter	r to the following:					
	Channa Watson						
	- <u>-</u>	Name of Person					
	Newbridge Wireless, LLC						
		Firm/Company					
	11820 W Market Pl Ste J						
		Address					
	Fulton, MD 20759						
		City/State and Zip Code					
	1) ap@newbridgewireless.com , 2) cha	anna.watson@newbridgewireless.com					
	E-mail address: (to	be used for future annual report notification)					
or further info	ornation concerning this matter, please of	call:					
Chan	na Watson	301 317-0066 $x$ 102					
	Name of Contact Person	at () Area Code Daytime Telephone Number					
Regis	ng Address: stration Section	Street Address: Registration Section					
	sion of Corporations Box 6327	Division of Corporations The Centre of Tallahassee					
	thassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Please	sed is a check for the following amount: a make check payable to: FLORIDA DE 25.00 Filing Fee \$130.00 Filing F Centificate	EPARTMENT OF STATE  Fee & □ \$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate					





August 29, 2024

CHANNA WATSON 11820 W MARKET PL STE J FULTON, MD 20759

SUBJECT: NEWBRIDGE WIRELESS, LLC

Ref. Number: W24000113795

We have received your document for NEWBRIDGE WIRELESS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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.

Texas issues a Certificate of Fact that is what we are needing in order for this Foreign LLC to be filed here in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tracy L Lemieux Regulatory Specialist II

Letter Number: 624A00017917

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

IN COMPLANCE WITH SECTION 605.0902, PLORIDA STATUTES THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Newbridge Wireless, 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 "L.C.") 3. 81-0657479 Texas (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability.) 11820 W Market Pl Ste J (Street Address of Principal Office) Fulton, MD 20759-2420 Fulton, MD 20759-2420 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Northwest Registered Agent LLC Name: 7901 4th St N STE 300 Office Address: St. Petersburg (City) 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)

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:	Title or Capacity:	Name and Address:
□Manager	Name: Channa Watson	■Manager	Name:
□Member	Address: Market Pl Ste J	□Member	Address: 11820 W Market Pl Ste J
<b>■</b> Authorized	Fulton, MD 20759-2420	□Authorized	Fulton, MD 20759-2420
Person		Person	
Other		□Other	
□Manager	Mohammad Kamal	□Manager	Name:
⊔Member	Address: 11820 W Market Pl Ste J	∐Member	Address:
■Authorized	Fulton, MD 20759-2420	□Authorized	
Person		Person	
□Other	Other	Other	
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other_

<u>Important Notice:</u> 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.

Chaurui	Watsan				
Signature of an authorized person					
Channa Watson					
	Typed or printed name of signee				

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



# Office of the Secretary of State

### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for Newbridge Wireless, LLC (file number 800398674), a Domestic Limited Liability Company (LLC), was filed in this office on October 06, 2004.

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

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 September 10, 2024.



gave Helson

Jane Nelson Secretary of State