RI SOS Filing Number: 202032439500 Date: 1/15/2020 12:09:00 PM



Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

The name of the limited liability company is:			· · · · ·	
Deep Blue Communications, LLC				-
s this company organized in its state or country of for	mation as a low-profit limited liability	company? Yes	No No	X.
The name, if different, under which it proposes to regi	ster and transact business in Rhode I		123	<u> </u>
			¥	<u> </u>
2. The LLC is organized under the laws of: New York	ork	- 11-12-11-1	5	
3. The date of its organization is: 07/18/2003			PH 12	(i)
And the period of its duration is: CHECK ONE BOX C	DNLY		12: 09	٠,٠
X Perpetual (on-going)			. 0	
Date certain for dissolution				•-
. The name and address of the resident agent/office	in Rhode Island is:			.e.
Agent Name C T Corporation System				•
Street Address (NOT a P.O. Box) 450 Veterans Memoria	al Parkway, Suite 7A			•
City/Town East Providence	State RHODE ISLAND	Zip Code 02914		_
. The purpose or purposes which it proposes to purs	ue in the transaction of business in R	hode Island are:		• •
Company engineers, installs and manages commercial WiF	i networks			-

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 **Website:** www.sos.ri.gov

FILED

JAN 1/8 2020

FORM 460 - Revised | 11/2019

10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Date				
If not so required, of the principal office of the foreign limited liability company is: 7 Century Hill Drive, Latham, NY 12110 8. The mailting address for the limited liability company is: 1701 John F. Kennedy Blvd, Philadelphia, PA 19103-2838 9. Management of the Limited Liability Company: The Limited Liability Company is to be managed by CHECK ONLY ONE BOX By its members (if you have checked this box, go to Section 9, (DO NOT fill out the chart below.) By one (1) or more managers (List managers below) MANAGER ADDRESS 10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective. CHECK ONE BOX ONLY Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	any time, there is no resident agent or if the	ed the agent of the foreign limited liability company for the resident agent cannot be found or served following	or service of process if, and the exercise of reason	at nable
8. The mailing address for the limited liability company is: 1701 John F. Kennedy Bivd, Philadelphia, PA 19103-2838 9. Management of the Limited Liability Company: The Limited Liability Company is to be managed by CHECK ONLY ONE BOX Some companies of the Limited Liability Company is to be managed by CHECK ONLY ONE BOX Some companies of the Limited Liability Company is to be managed by CHECK ONLY ONE BOX Some companies of the Checked this box, go to Section 9. (DO NOT fill out the chart below.) Date managers (List managers below) MANAGER	The address of the office required to be if not so required, of the principal office of	maintained in the state or country of its organization the foreign limited liability company is:	n by the laws of that sta	te or,
9 Management of the Limited Liability Company: The Limited Liability Company is to be managed by CHECK ONLY ONE BOX By its members (if you have checked this box, go to Section 9. (DO NOT fill out the chart below.) By one (1) or more managers (List managers below) MANAGER ADDRESS 10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY: Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under pensity of perjury. I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	7 Century Hill Drive, Latham, NY 12110			
9 Management of the Limited Liability Company: The Limited Liability Company is to be managed by. CHECK ONLY ONE BOX By its members (if you have checked this box, go to Section 9. (DO NOT fill out the chart below.) By one (1) or more managers (List managers below) MANAGER ADDRESS 10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY: Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under pensity of perjury. I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	8. The mailing address for the limited liab	lity company is:		
The Limited Liability Company is to be managed by CHECK ONLY ONE BOX X By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.) By one (1) or more managers (List managers below) MANAGER	1701 John F. Kennedy Blvd, Philadelphia, PA	19103-2838		
By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.) By one (1) or more managers (List managers below) ADDRESS 10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of penjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	9. Management of the Limited Liability Co	трапу:		
By one (1) or more managers (List managers below) MANAGER ADDRESS 10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing)	The Limited Liability Company is to be ma	anaged by: CHECK ONLY ONE BOX		
By one (1) or more managers (List managers below) MANAGER ADDRESS 10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing)	X By its members (If you have checked	this box, go to Section 9. (DO NOT fill out the char	t below.)	d;
MANAGER ADDRESS 10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing)	l <u></u>			
10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Date				(
10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Date				
10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Date				
10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing. 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Date				
11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing)				÷
11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing)				<u>-</u>
11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY X Date received (Upon filing)	10. This application must be accompanied	I by a Certificate of Good Standing/Letter of Status	from the state or country	of.
Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	formation dated within 60 days of the date	e of filing.		
Later effective date (Date must be no more than 90 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	11. Date when this application for Certifica	ate of Registration will be effective: CHECK ONE BO	OX ONLY	:
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	Date received (Upon filing)			
accompanying attachments, and that all statements contained herein are true and correct. Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	Later effective date (Date must be no	more than 90 days from the date of filing)		
Type or Print Name of LLC Deep Blue Communications, LLC Signature of Authorized Person	Under penalty of perjury, I declare and affi accompanying attachments, and that all s	irm that I have examined this Application for Registr talements contained herein are true and correct.	ation, including any	
Signature of Authorized Person	Type or Print Name of LLC		Date	<u></u>
i) with the second of the seco	Deep Blue Communications, LLC		011/2/2020	÷ .
	Signature of Authorized Person			
· ·			-	

State of New York Department of State } ss:

I hereby certify, that WIFIFEE, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/18/2003, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment WIFIFEE, LLC, changing its name to DEEP BLUE COMMUNICATIONS, LLC, was filed 10/03/2011.



Witness my hand and the official seal of the Department of State at the City of Albany, this 10th day of January two thousand and twenty.

Braden C Hydra

Brendan C. Hughes
Executive Deputy Secretary of State

202001130461 • 45

CORPORATIONS DIV

RI SOS Filing Number: 202032439500 Date: 1/15/2020 12:09:00 PM



I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

January 15, 2020 12:09 PM

Nellie M. Gorbea
Secretary of State

Tullin U. Soler

