



**State of Rhode Island
Office of the Secretary of State**

Fee: \$150.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Limited Liability Company
Application for Registration**

(Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the limited liability company is: All Access Service, LLC

Enter your name exactly as it appears in your state. If your name includes an entity ending other than LLC or Limited Liability Company, complete Article II. The elected name in RI must include the entity ending LLC or Limited Liability Company.

ARTICLE II

The name, if different, under which it proposes to register and transact business in Rhode Island is:

ARTICLE III

The Limited Liability Company is organized under the laws of: State: MO Country: USA

The date this Application for Registration is to become effective, not prior to, nor more than 90 days after the filing of this Application for Registration.

Later Effective Date: 07/25/2024

ARTICLE IV

The date of its organization is: 9/1/2020

ARTICLE V

The period of its duration is: Perpetual

ARTICLE VI

The address (post office box not acceptable) of the limited liability company's resident agent in Rhode Island:

No. and Street: 50 INDUSTRIAL CIR #105

City or Town: LINCOLN

State: RI Zip: 02865

Name: REPUBLIC REGISTERED AGENT LLC

Article VII

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

ALL ACCESS SERVICE, LLC IS IN THE BUSINESS OF FACILITATING THE SALES OF INTERNET AND TELECOMMUNICATIONS SERVICES TO RESIDENTIAL CUSTOMERS.

ARTICLE VIII

The Rhode Island Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

ARTICLE IX

The address of the office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized:

No. and Street: 520 E 19TH AVE

City or Town: NORTH KANSAS CITY State: MO Zip: 64116 Country: USA

ARTICLE X

The mailing address for the limited liability company is:

No. and Street: 520 E 19TH AVE

ATTN: LICENSING DEPT

City or Town: NORTH KANSAS CITY State: MO Zip: 64116 Country: USA

ARTICLE XI

The limited liability company is to be managed by its Members* or X Managers (check one)

*** If you checked to be managed by your MEMBERS (the owners) DO NOT complete the following section. Only complete the following section if you checked to be managed by MANAGERS.**

The name and address of each manager:

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|---------|--|--|
| MANAGER | JOSH BROWNE | 520 E 19TH AVE NORTH KANSAS CITY, MO 64116 USA |
| MANAGER | JOE KING | 520 E 19TH AVE NORTH KANSAS CITY, MO 64116 USA |
| MANAGER | LANCE COMBS | 520 E 19TH AVE NORTH KANSAS CITY, MO 64116 USA |
| MANAGER | BRANDON REED | 520 E 19TH AVE NORTH KANSAS CITY, MO 64116 USA |
| MANAGER | DEAN LANDMAN | 520 E 19TH AVE NORTH KANSAS CITY, MO 64116 USA |

| | | |
|---------|--------------|---|
| MANAGER | MARK KLEEMAN | 520 E 19TH AVE NORTH KANSAS CITY, MO 64116 USA |
| MANAGER | MIKE EMMONS | 520 E 19TH AVE NORTH KANSAS CITY, MO 64116 USA |

This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

Signed this 25 Day of July, 2024 at 4:45:06 PM by the Authorized Person.

JOSH BROWNE

Form No. 450
Revised 09/07

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STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

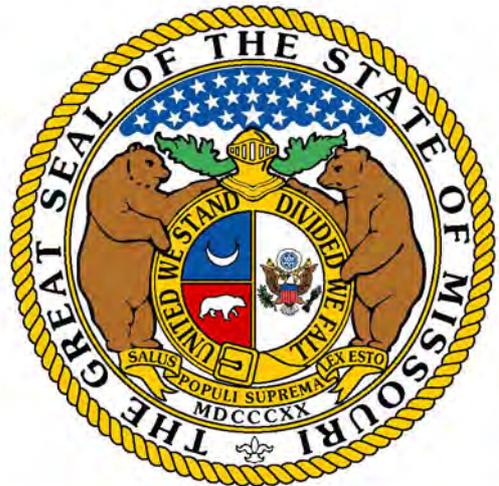
I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

All Access Service, LLC
LC1728900

was created under the laws of this State on the 1st day of September, 2020, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 3rd day of July, 2024.


Secretary of State



Certification Number: CERT-07032024-0113



State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

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:

July 25, 2024 04:42 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

