

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CERTIFICATE OF GOOD STANDING

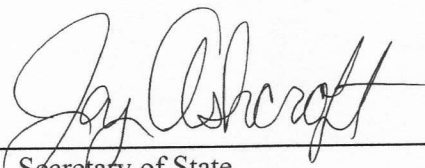
I, John R. Ashcroft, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Tiger Computer Consulting LLC

LC0696773

A Missouri entity was created under the laws of this State on 11/9/2005, and is Active, having fully complied with all the 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, the 17th day of February, 2021.


Secretary of State



Certification Number: CERT-IN59580



State of Missouri

John R. Ashcroft, Secretary of State

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

X00926956
Date Filed: 7/30/2018
Expiration Date: 10/24/2023
John R. Ashcroft
Missouri Secretary of State

Registration of Fictitious Name

(Submit with filing fee of \$7.00)
(Must be typed or printed)

This information is for the use of the public and gives no protection to the name being registered. There is no provision in this Chapter to keep another person or business entity from adopting and using the same name. The fictitious name registration expires 5 years from the filing date. (Chapter 417, RSMo)

Please check one box:

☐ New Registration ☒ Renewal X00926956 ☐ Amendment ☐ Correction
Charter number Charter number Charter number

The undersigned is doing business under the following name and at the following address:

Business name to be registered: Intercept Wireless

Business Address: 17213 US 69 Hwy Suite 7

(PO Box may only be used in addition to a physical street address)

City, State and Zip Code: Liberty, MO 64068

Owner Information:

If a business entity is an owner, indicate business name and percentage owned. If all parties are jointly and severally liable, percentage of ownership need not be listed. Please attach a separate page for more than three owners. The parties having an interest in the business, and the percentage they own are:

Name of Owners, Individual or Business Entity	Charter # Required If Business Entity	Street and Number	City and State	Zip Code	If Listed, Percentage of Ownership Must Equal 100%
Tiger Computer Consulting LLC	LC0696773	17213 US 69 HWY SUITE 7	LIBERTY, MO	64068	

All owners must affirm by signing below

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties of a false declaration under Section 575.060 RSMo)

<u>Tiger Computer Consulting LLC - Kevin Smith</u>	<u>TIGER COMPUTER CONSULTING LLC - KEVIN SMITH</u>	<u>07/30/2018</u>
<small>Owner's Signature or Authorized Signature of Business Entity</small>	<small>Printed Name</small>	<small>Date</small>

Name and address to return filed document:

Name: Kevin Smith

Address: Email: kevi3315@hotmail.com

City, State, and Zip Code: _____