

B04000000366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

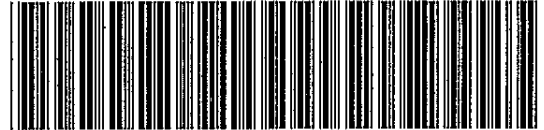
(Document Number)

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07/13/04--01034--010 **148.75

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07 AUG 19



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 21, 2004

ROSEMARY G. SEFCHECK
W.B. KANIA & ASSOCIATES, LLC
P.O. BOX 759
UNIONTOWN, PA 15401

SUBJECT: VERTICAL ACCESS SERVICES, LP
Ref. Number: W04000027908

We have received your document for VERTICAL ACCESS SERVICES, LP and your check(s) totaling \$148.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 904A00046130

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W.B.KANIA & ASSOCIATES, LLC

CERTIFIED PUBLIC
ACCOUNTANTS

71 NORTH MT. VERNON AVENUE ■ P.O. BOX 759 ■ UNIONTOWN, PENNSYLVANIA 15401
724.437.2731 ■ FAX 724.437.2952 ■ WWW.WBKANIA.COM

July 8, 2004

Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Dear Sirs,

Please find attached an application by Vertical Access Services, Limited Partnership to do business in Florida. We have also attached an Affidavit of the Capital Contributed by the Limited Partners.

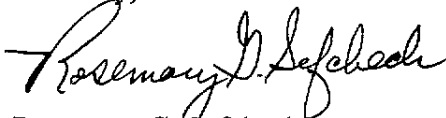
A check in the amount of \$148.75 is also enclosed. The amount represents the minimum fess for capital contributions to be used in Florida, the \$35.00 fee for the designation of a registered agent, and \$61.25 for a certified copy of the certificate under seal.

You may sent the certified copy of the filing to our office: W.B. Kania & Associates, LLC, P. O. Box 759, Uniontown, PA 15401. Attention: Bryan Ponzurick.

If you need additional information, you may contact Mr. Ponzurick at the above address or Mr. David Mahokey at the address listed on the attached filings.

Thank you for your assistance in this matter.

Sincerely,


Rosemary G. Sefcheck

06 AUG 19 AM 7:56
DIVISION OF CORPORATIONS

WILLIAM B. KANIA, CPA ■ PAUL KANIA, CPA ■ RICHARD KANIA ■ JUDITH M. RIFFLE, CPA ■ BRYAN PONZURICK, CPA
ROSEMARY SEFCHECK, CPA ■ DENISE D'ANNOLFO, CPA ■ NATALIE G. SHARPE, CPA

MEMBERS OF ■ AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS ■ PENNSYLVANIA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS ■ WEST VIRGINIA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. VERTICAL ACCESS SERVICES, LP
(Name of limited partnership as it is in the home state)
2. VERTICAL ACCESS SERVICES, LIMITED PARTNERSHIP
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")
3. PENNSYLVANIA 4. 01/18/02
(State of Formation) (Date of Formation)
5. CT CORPORATION SYSTEM
(Name of Registered Agent for Service of Process)
6. 1200 SOUTH POINTE ISLAND ROAD
(Street Address of Registered Office)

PLANTATION Florida 33324
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

Kevin A. Seburnia, Asst. Secy.
(Agent must sign on this line)

8. VERTICAL ACCESS SERVICES, LP
126 Barney's Road
ROUTE 51, PO BOX 563, PERRYOPOLIS, PA 15473
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
- DAVID W. MAHOKEY - 128 DOGWOOD DRIVE, DUNBAR, PA 15431
- RAY GRAHAM - 1300 INDIAN CREEK ROAD, BOWDER, CA 30108
- DAVID GRAHAM GROUP, LLC - 126 BARNEY'S ROAD, PO BOX 563, PERRYOPOLIS, PA 15473
M. 4-3431
10. VERTICAL ACCESS SERVICES, LP - PO BOX 563, 126 BARNEY'S ROAD, PERRYOPOLIS, PA
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

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 15473

12. VERTICAL ACCESS SERVICES, LP, 126 BARNEY'S ROAD, PO BOX 563, PERRYOPOLIS, PA

15473

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 7TH day of JULY, 2004.

[Signature]
General Partner

STATE OF Pennsylvania

COUNTY OF Fayette

On this 7th day of July, 2004.

David W. Manokuy, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

[Signature]
(Notary Public Signature)

Jaime R. Newhouse
(Notary's Printed Name)

My Commission Expires: October 10th, 2005

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NOTARY OF PUBLIC
DIVISION OF REVENUE


**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED
PARTNERSHIP**

BEFORE ME the undersigned personally appeared David W. Mahokey
a general partner of Vertical Access Services, LP, a (an) Pennsylvania
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 38,569.00
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of
transacting business in Florida is \$ 0.00.

*Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and
that the facts stated herein are true and correct.*

Signed this 7th day of July, 2004.



General Partner

STATE OF Pennsylvania
COUNTY OF Fayette

On this 7th day of July, 2004.

David W. Mahokey personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Jaime B Newhouse
(Notary Public Signature)

Jaime B. Newhouse
(Notary's Printed Name)

Seal

My Commission Expires: October 10th, 2005

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