F96 CARSANCAL CETTER Z 197

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

COURIER ADDRESS:

Qualification/Tax Lien Sec.

Division of Corporations

Tallahassee, FL 32399

409 E. Gaines St.

Dear Sir or Madam:

MAILING ADDRESS:

P. O. Box 6327

Qualification/Tax Lien Sec.

Division of Corporations

Tallahassee, FL 32314

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of corporation: must include the word INCORPORATED", COMPANY, CORPORATION or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (State or country under the law of which it is incorporated)

3. 58-2074049

(FEI number, if applicable) 4. 4-14-93 5. Person fund (Duration: Year corp. will chase to exist or "perpetual") 6. Awaifing application approval
(Date first transposed business in Florida. (See september 007.1501, 007.1502, and 817.155, F.S.) 7. 13/76 N. D. 16 Mary Hay, Ste 2/4

Tamps, FL 336/8-2406

(Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridal) 9. Name and street address of Florida registered agent: Office Address: 13176 N. Dale Mary Huy, 4214

[Jampa , Floride, 33618]
(Zip Code) Name: James M. Kissane 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation 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.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

MM HANNA (Registered agent's signature)

1	•
12. N	ames and addresses of officers and/or directors: (Street ddress ONLY- P. O. Box NOT acceptable)
A. D	IRECTORS (Street address only- P. O . Box NOT acceptable)
Chairma	n: lance Kissane
Address	<u>منيبين والناقب من المناقب والناقب المناقب المناقب والناقب والناقب والناقب والناقب والناقب والناقب والناقب والن</u>
	Tumps, FL 33612
Vice Ch	airman:
Address	
Directo	r:
Address	
Directo	
Address	
B.OFFICE	RS(Street address only- P. O. Box NOT acceptable)
Presider	it: Navey Regiva Kissane
Address:	10312 CARROLL Shore Place
	Tamps, FL 33612
Vice Pre	sident:
Address:	
Secretar	y: CARI Puls EsquiRE - Hartley & Puls
Address:	127 E. Popee de Leon Avenue
	DECATUR, GA 30030
Treasure	
Address:	10312 CARROLL Shore Place Tompo, FL 33612
	·
NOTE: In	necessary, you may attach an addendum to the application additional officers and/or directors.
13. (A CANGO IVI TA ADOMA
	mature of Chalyman, Vice Chairman, or any officer listed in number 12 of the application)
14.	ped or printed name and capacity of person signing application)
	capacity of person signing application)

Secretary of State Business Information and Services .

Onite 315, Mest Trucer 2 Martin Luther King Ir. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 960890069
CONTROL NUMBER : 9310401
DATE INC/AUTH/FILED: 04/14/1993
JURISDICTION : GEORGIA
PRINT DATE : 03/29/1996
FORM NUMBER : 211

TELLY COMMUNCATIONS/NANCY R RISSANE 13176 N DALE MABRY HWY., STE. 214 TAMPA FL 33618-2406

SECRETARY OF STATE OF

CERTIFICATE OF EXISTENCE

I, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

TELLY COMMUNICATIONS, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

GIA

Lewis a. Massey

Secretary of State