# F99000000000616

103 N. MERIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301 222-1173

#### FILING COVER SHEET ACCT. #FCA-14

( )ARTICLES OF INCORPORATION ( )ARTICLES OF AMENDMENT ( )ARTICLES OF DISSOLUTION ( )ANNUAL REPORT ( )TRADEMARK/SERVICE MARK ( )FICTITIOUS NAME ( )CERT. OF AUTHORITY ( )LIMITED PARTNERSHIP ( )LIMITED LIABILITY ( )REINSTATEMENT ( )MERGER ( )WITHDRAWAL ( )CERTIFICATE OF CANCELLATION ( )UCC-1 ( )UCC-3 ( )OTHER:  STATE FEES PREPAID WITH CHECK# 500 7 FOR \$ 79.75  AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:  COST LIMIT: \$  PLEASE RETURN:  STATE FEES PREPAID WITH CHECK# 500 7 FOR \$ 79.75  AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:  COST LIMIT: \$  PLEASE RETURN:  STATE FEES PREPAID WITH CHECK# 500 7 FOR \$ 79.75  AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:  COST LIMIT: \$  PLEASE RETURN:  STATE FEES PREPAID WITH CHECK# 500 7 FOR \$ 79.75  AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:  COST LIMIT: \$  PLEASE RETURN:  STATE FEES PREPAID WITH CHECK# 500 7 FOR \$ 79.75  AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:  COST LIMIT: \$  PLEASE RETURN:  STATE FEES PREPAID WITH CHECK# 500 7 FOR \$ 79.75  AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:  AL APR 2 1 1999	CONTACT:  DATE:  REF. #:  CORP. NAME:	CINDY HICKS  5-21-99 =  0269.6896  MVV. Com Com  The	200002882072E -05/21/9901027004 *****78.75 *****78.75 munications,
AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:  COST LIMIT: \$  PLEASE RETURN:  SKOLO TO THE COPY  ( ) CERTIFICATE OF STATUS ( ) PLAIN STAMPED COPY  6 7 16 117 12 AVI 66	( ) ANNUAL REPORT ( ) CERT. OF AUTHORITY ( ) REINSTATEMENT ( ) CERTIFICATE OF CANCEL	<ul><li>( ) TRADEMARK/SERVICE MARK</li><li>( ) LIMITED PARTNERSHIP</li><li>( ) MERGER</li></ul>	( ) FICTITIOUS NAME ( ) LIMITED LIABILITY ( ) WITHDRAWAL
CERTIFIED COPY  SNOW THE STATUS  () PLAIN STAMPED COPY  67:6 117 12 AVII 66		ACCOUNT IF TO BE DEBITED:	
Examiner's Initials	CERTIFIED COPY	64:8 117 12 AVI 66	

### 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 corpor	OM COMMUNICATIONS, I ration; must include the word iations of like import in langu r partnership if not so contains	INCORPORATED", " age as will clearly indic	ate that it is a corporation		_
_	ornia under the law of which it is in				<del>-</del> ·
(State or country	under the law of which it is in	corporated)	(FEI number, i	f applicable)	
4. <u>Febru</u>	e of incorporation)	5. <u>Per</u>	petual Year corp. will cease to		_ ,
(Date	e of incorporation)	(Duration:	Year corp. will cease to	existor "perpetual")	
6	I/A transacted business in Florida		······································		<b></b>
(Date first	transacted business in Florida	.) (SEE SECTIONS 60'	7.1501, 607.1502 and 81	7.155, F.S.)	
7	75 Rowland Way, Fir	st Floor, Novat	o, CA 94945	-	
	(Curr	ent mailing address)			
	Felecommunication s s) of corporation authorized in		o be carried out in state	of Florida)	_
9. Name and str	eet address of Florida reg	istered agent: (P.O.	Box or Mail Drop Bo	x <u>NOT</u> acceptable)	
Name:	NRAI Services, In	<u>c.</u>		· · · =	ما ساد
Office Address:	526 E. Park Avenu	<u>a</u>			<del>-</del> ,
	Tallahassee		, Florida, 32301 (Zip code)		
10. Registered a	gent's acceptance:				
this application, I with the provisions	ed as registered agent and to d hereby accept the appointmen s of all statutes relative to the my position as registered agen	t as registered agent ar proper and complete pe	ed agree to act in this ca	pacity. I further agree to c	omply
	See	attached_			-
	(Re	gistered agent's signatur	re)		<del></del>

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

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

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLÖRIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	
	(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.)
2.	3.
	(State or country under the law of which it is incorporated)  3. (FEI number, if applicable)
4.	(Date of Incorporation)  5
	"perpetual")
6.	
	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7.	
	(Current mailing address)
8.	
•	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: NRAI Services, Inc.
	Office Address: 526 E. Park Avenue
	Tallahassee, Florida, 32301
10	Registered agent's acceptance: (Zip Code)

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.

(Registered agent's signature)
Charles Baclet, Vice President

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.

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dress:		F		<u>_</u> :
rector:		<u> </u>		_ / ra <sub>n</sub> · .
				2.7
OFFICERS (	Street address only - P.O. Box l	vOT acceptable)		
	See attached			<del></del>
resident:				
ddress:		47.52		<u> </u>
	, <u></u>	7E		# 1 d a
Vice President: _		<u> </u>		
Address:		ngere v.	A STATE OF THE STA	
		2.8		- , -, -, -, -, -, -, -, -, -, -, -, -,
Secretary:				
Address:				17. L
71001000				Fig. 1
<del></del>				
Treasurer:				
Address:		. F	and the second s	
		S. S. Van	ing additional officers and/or directors.	
NOTE: If neces	ssary, you may attach an addendum	to the application list	ing additional officers and/or directors.	
لما	Homie	rman or any officer	listed in number 12 of the application)	
		Illian, or any order		

#### MVX.COM COMMUNICATIONS, INC. LIST OF DIRECTORS AND OFFICERS

#### **Directors:**

Name and Address

Office

Edward A. Brinskele
75 Rowland Way, First Floor
Novato, CA 94945

Thomas R. Rice
75 Rowland Way, First Floor
Novato, CA 94945

Jeffrey G. Richards
75 Rowland Way, First Floor
Novato, CA 94945

Director
Novato, CA 94945

#### Officers:

Edward A. Brinskele
75 Rowland Way, First Floor
Novato, CA 94945

Jeffrey G. Richards
75 Rowland Way, First Floor
Novato, CA 94945

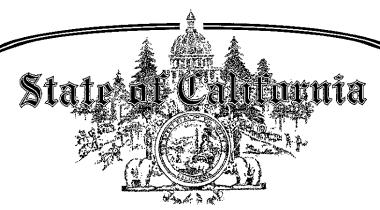
Kenneth Holmes
75 Rowland Way, First Floor
Novato, CA 94945

Chief Financial Officer

75 Rowland Way, First Floor
Novato, CA 94945

William E. Horwich
1111 Broadway, 24<sup>th</sup> Floor

Oakland, CA 94607



#### SECRETARY OF STATE

## CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

#### MVX.COM COMMUNICATIONS, INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

May 19, 1999

Billyones

Secretary of State