~~FLORIDA~~ BUSINESS REPORT (UBR)

DOCUMENT # M95975

AMENDED

Entity Name

~~R-&-H TELEPHONE CONTRACTORS, INC.~~

N/C 9/29/00 United Telecom, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 25 PM 3:38

Principal Place of Business	Mailing Address
% BEVERLY L CLARK/P O BOX 549 N.E. INTERSECTION OF U.S. HWY 27 & S.R. 47 FT. WHITE FL 32038	% BEVERLY L CLARK/P O BOX 549 N.E. INTERSECTION OF U.S. HWY 27 & S.R. 47 FT. WHITE FL 32038

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
215 Foxborough Dr. SW Suite, Apt. #, etc.	215 Foxborough Dr. SW Suite, Apt. #, etc.
Leesburg, VA City & State	Leesburg, VA City & State
20175 Zip	USA Country
20175 Zip	USA Country

4. FEI Number 59-2907725 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CLARK, BEVERLY L 83E CORNER OF THE INTERSECTION OF U S HW Y 27 AND STATE ROAD 47 FORT WHITE FL 32038	Name Beverly Hollingsworth Street Address (P.O. Box Number is Not Acceptable) 22316 Northwest 190th Avenue P.O. Box 2848 City High Springs FL Zip Code 32643

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE ~~Christy Martin~~ Beverly L Clark 10/13/2000

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CLARK, HOWARD E. P.O. BOX 549 N/A - E WELL ST FT. WHITE FL	☒ Delete	400003410034 09/29/00--01033--004 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CLARK, BEVERLY, L P.O. BOX 549 N/A - E WELL STREET FT WHITE FL	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST MARTIN, CHRISTY L P.O. BOX 726 N/A - N MILL ST FORT WHITE FL 32038	☐ Delete	Pres/Sec/Treas Martin, Christy L. 215 Foxborough Dr. SW ~~Leesburg, VA 20175~~	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	Vice-Pres Herman E. Martin, Jr. 215 Foxborough Dr. SW Leesburg, VA 20175	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 above, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Christy Martin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR