

# F02000001382

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CommConnexion, Inc. 3/14  
(Name of corporation - must include suffix)

Dear Sir or Madam: FOR CORP 700005107387--5  
-03/14/02--01033--009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

TERRY F. LAWSON  
(Name of Person)  
Comm Connexion, Inc  
(Firm/Company)  
5555 Shepherds Pond, Suite B  
(Address)  
Alpharetta, GA 30004  
(City/State and Zip code)

FILED

For further information concerning this matter, please call:

TERRY F. LAWSON at (770) 663-0229  
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 MAR 14 PM 12:23

FILED

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.

1. Comm Connexion, Inc.

(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. Georgia 3. 02-0552700  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02-20-02 5. \_\_\_\_\_  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 5555 Shepherds Pond, Suite B, Alpharetta GA 30004  
(Principal office address)

5555 Shepherds Pond, Ste B, Alpharetta, GA 30004  
(Current mailing address)

8. Telecommunications Construction  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Voice Stream

Office Address: Cross Roads Business Park  
8100 Sw 10th Street, Bldg 3, Ste 1000  
Plantation, Florida 33324  
(City) (Zip code)

FILED  
02 MAR 14 PM 12:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.*

Terry J. Lawson  
(Registered agent's signature)

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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: Barry W. Wray

Address: 5555 Shepherds Pond, Ste B.  
Alpharetta, Georgia 30004

Vice President: Bert A. Lawson

Address: 5555 Shepherds Pond, Ste B  
Alpharetta, GA 30004

Secretary: Terry F. Lawson

Address: 5555 Shepherds Pond, Alpharetta, GA 30004

Treasurer: Terry F. Lawson

Address: 5555 Shepherds Pond, Alpharetta, GA 30004

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Terry F. Lawson  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. TERRY F. LAWSON, Secretary / Treasurer  
(Typed or printed name and capacity of person signing application)

**Secretary of State**

**Corporations Division**

**315 West Tower**

**#2 Martin Luther King, Jr. Dr.**

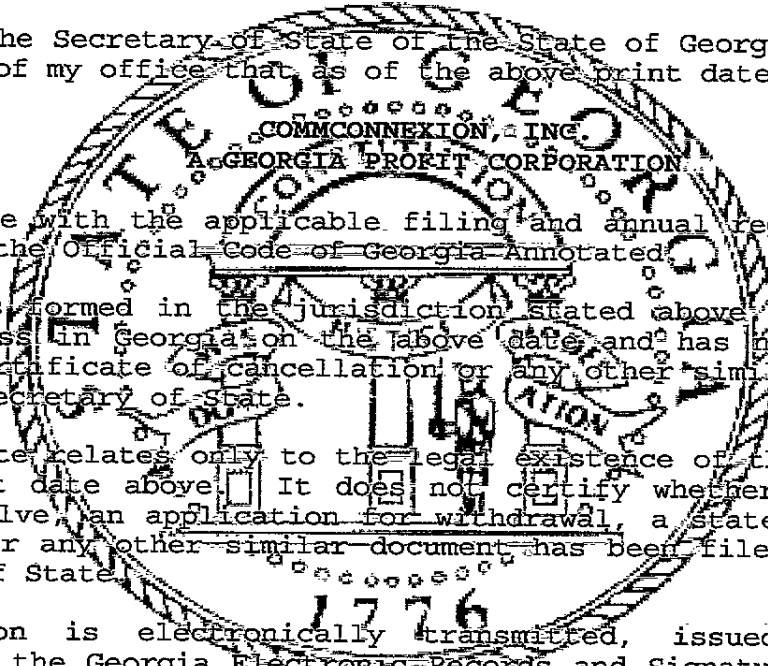
**Atlanta, Georgia 30334-1530**

CONTROL NUMBER : 0209403  
DATE INC/AUTH/FILED: 02/20/2002  
JURISDICTION : GEORGIA  
PRINT DATE : 03/01/2002  
FORM NUMBER : 211

COMMCONNECTION, INC.  
TERRY F. LAWSON  
5555 SHEPHERDS POND  
ALPHARETTA, GA 30004

**CERTIFICATE OF EXISTENCE**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date



COMMCONNECTION, INC.  
A GEORGIA PROFIT CORPORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date 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 print date above. 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 information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and 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.

20020301195422906



Cathy Cox  
Secretary of State