913-315-5820 Daytime Phone #

2/23/01 Date

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SIGNATURE: X SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING GENERAL PARTNER.

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SPRINT COMMUNICATIONS COMPANY LIMITED PARTNERSHIP					FILED ~				*		
Principal Plac	ce of Busines		Maili	ng Address				01 FEB 27	AM O	. 27	
6500 SPRINT PARKWAY 6500 SPRINT PARKWAY											
MAILSTOP: HL-5ASTX OVERLAND PARK KS 66251-5777 MAILSTOP: HL-5ASTX OVERLAND PARK KS 66251-5777 OVERLAND PARK KS 66251-5777		stop: HL-5astx Rland Park KS 662	51_6777		٠	SECRETARY (OF SILAT	ΙE			
OVERLAND FA	UN NO 00231	-3/11	OVER	ILMID FAIN NO OUZ	K NS 0025175777		THE REPORT OF THE PROPERTY OF				
2. Principal Place of Business		3. Ma	3. Mailing Address					1 5 1	O(ALL DIEN BYAN) BYAN IO	<u>[</u>]	
Suite, Apt. #, etc.		Sui	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE						
City & State		Cit	City & State		4. FEI Number Applied For Not Applicable				_		
Zip		Country	Zip	Zip Country		itry	5. Certificate o	f Status Desired	□ \$	8.75 Additional se Required	
	6. Name	and Address of Current	t Register	red Agent		Name	7. Name and A	ddress of New Reg	istered Ag	jent	-
TUE DOEN	TICE HALL	CORPORATION SYST	EM INC					en de la companya de	مر کا کا		
	ITICE HALL IGNOLIA ST		EM, INC.	•		Street Address	(P.O. Box Number	is Not Acceptable)			
	SEE FL 32										
					City	City FL Zip Code					
8. The above	named entit	y submits this statement fo	or the pur	pose of changing its	registere	ed office or registe	ered agent, or both,	in the State of Floric	da.		
SIGNATURE .	Signature, typed	or printed name of registered agent	t and title if ap	plicable. (NOT	E: Registere	d Agent signature require	ed when reinstating)		DATE		
9. Capital Co		\$129,300,000.00		10. Amount of Capit in FLORIDA to d		butions	· . ~ . ^	11. MAKE CHECK		O DEPT. OF STATE FEE INFORMATION	
	A	GENERAL PARTNER		A BUSINESS EN	TITY M			TIVE WITH THIS	OFFICE.		
12.	NOTE	GENERAL PARTNE			ne form	; an amendme	nt must be filed	to change a gene ADDRESS CHAN			_
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indicated	on this repor	information supplied with the information supplied with the information supplied with the information and accurate and empowered to execute the information in the information supplied with the information supplied wi	d that my s	signature shall have	the same	e legal effect as if	ection 119.07(3)(i), made under oath; t	Florida Statutes. I fu hat I am a General P	rther certifi artner of th	y that the information e limited partnershi	n p or