PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED. **PARTNERSHIP** REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATION:

DOCUMENT #

1. Name of Limited Partnership

396000000297 Sprint Spectrum Holding Company, L.P.

9/28/00

			1,01100			
2. Principal Office Address 2330 Shawnee Mission Parkway		3. Mailing Office Address 6500 Sprint Parkway		4. Date Formed or Registered To Do Business in Florida 08/01/1996		
Suite, Apt. #, etc. Mailstop: KSWESA0106		Suite, Apt. #, etc. Mailstop: KSOPHL0512-5ASTX		5. FEI Number 48-1165242	Applied For Not Applicable	
City & State Westwood, KS		City & State Overland Park, KS		CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee require for a Certificate of Status		
Zip 66205	Country USA	Zip 66251	Country USA	7a. Capital Contributions as shown on Record: -() - 7b. Amount of Capital Contributions in FLORIDA to	data:	
8. Name and Address of Current Registered Agent				-0-		
Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street				FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year caport form is delinauent. Note: If the amount entered in 7a, a supplemental afflowit must be submitted along with a separate		
Suite, Apt. #, Etc. City State Zip Code						
Tallahassee		FL	32301-2525	·		
 Pursuant to the provision for the purpose of channel 	ns of sections 620,1051 and 620, ging its registered office or regist	192, Florida Statutes, the abo ered agent, or both, in the Sta	ove-named limited partnership org ate of Florida. Such change was a	panized or registered under the laws of the State of Florida, submuthorized by its general partner(s). I hereby accept the appointm	uts this statement nent of registered	

agent, I am familiar with, and accept the obligations of section 620, 192, Florida Statutes

AST. SEC

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
Sprint Enterprises, L.P.	2330 Shawnee Mission Parkway	Westwood, KS 66205	B96000000296
SWV Six, Inc.	2330 Shawnee Mission Parkway	Westwood, KS 66205	F01000004 <u>8</u> 42

600004603026-

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered/o execute this report spreadured by chapter 620. Florida Statutes.

SIGNATURE Du

Typed or Printed Name of General Pariner Signing Form Laura L. Ozenberger, Asst. Secretary

(913) 624-2514

B96000000297

ACCOUNT NO. 072100000032

REFERENCE

AUTHORIZATION

COST LIMIT

\$ 1282.50

ORDER DATE : September 10, 2001

ORDER TIME : 11:58 AM

ORDER NO. 465819-005

CUSTOMER NO:

4360800

CUSTOMER: Ms. Reta Juiliano

Sprint Corporation

2330 Shawnee Mission Parkway

Mailstop Kswesa0105 Westwood, KS 66205

REINSTATEMENT

XX_ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull

EXAMINER'S INITIALS