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ACCOUNT NO.

072100000032

REFERENCE

543311

4330012

COST LIMIT :

ORDER DATE: January 7, 2000

ORDER TIME : 10:28 AM

ORDER NO. : 543311-011

CUSTOMER NO:

4330012

CUSTOMER: Katherine Shafer

Swidler Berlin Shereff &

Suite 300

3000 K Street, N.w.

Washington, DC 20007-5116

NAME:

NNB, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations						
	m or corpo					
SUBJECT:		NNB, Inc.	in a must include suffix)	<u> </u>		
		(Name of corporat	ion - must include suffix)			
Dear Sir or Ma				8		
The enclosed ' "Certificate of to transact bus	'Application Existence" iness in Flo	n by Foreign Corporation f , and check are submitted to rida.	or Authorization to Transact o register the above reference	Business in Floridation ed foreign corporation	OF COMPOSE	
Please return all correspondence concerning this matter to the following:						
		(Name	of Person)	· ·		
	CSC					
	<u> </u>	(Firm/	Company)			
	1201 Ha	ys Street		-	- 1	
		(A	ddress)		•	
	Tallaha	assee, FL 32301		<u> </u>		
			State/Zip)			
Should you no	eed to call s	omeone concerning this ma	atter, please call:	-	;	
		at ( 90	4 ) 222-7495		- ;	
(Nan	ne of Person	n) (Ar	ea Code & Daytime Telepho	ne Number)	·	
STREET AD	DRESS:		MAILING ADDRESS:	:	-	
Qualification/ Division of Co 409 E. Gaines Tallahassee, F	orporations St.	ection	Qualification/Tax Lien S Division of Corporation P.O. Box 6327 Tallahassee, FL 32314		 :	
Enclosed is a	check for t	he following amount:				
□ \$70.00 Fi	ling 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. NNB. Inc. 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.) (State or country under the law of which it is incorporated) (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) planned for the future . (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 5071 Broadway 2nd Floor New York, NY 10034 (Current mailing address) Telecomunications services (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) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee 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. Corporation Service Compa (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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: See attached officers/directors rider	: .
Address:	
Vice Chairman:	
Address:	
	7
Director:	2 2
Address:	ي کي
	03
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: See attached officers/directors rider	· ;
Address:	
	·
Vice President:	
Address:	
Secretary:	
Address:	
	*
Treasurer:	
Address:	· · · · · · · · · · · · · · · · · · ·
NOTE: If necessary, you may attach an addendum to the application listing ad	ditional officers and/or directors.
13 MT Marcia	
(Signature of Chairman, Vice Chairman, or any officer listed	in number 12 of the application)
14. Art Garcia, Presiden	the contract of the contract o
(Typed or printed name and capacity of per	son signing application)

## <u>List of Directors and Officers</u> <u>for NNB, Inc.</u>

Directors	Officers		
Gordon Cook 25 Highview Tuckahoe, NY 10707	Gordon Cook Chief Executive Officer 25 Highview Tuckahoe, NY 10707	00 JAN 13	
Art Garcia 4305 Park Avenue Apartment 12 New York, NY 10453	Art Garcia President 4305 Park Avenue Apartment 12 New York, NY 10453		
Jeff Cook 25 Highview Tuckahoe, NY 10707	Jeff Cook Executive VP of Sales 25 Highview Tuckahoe, NY 10707		
Robert Keller 80 Park Drive Eastchester, NY 10709	Robert Keller Executive VP of Management Information Systems 80 Park Drive Eastchester, NY 10709		

## State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "NNB, INC." IS DULY INCORPORATED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING
AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF
THIS OFFICE SHOW, AS OF THE TENTH DAY OF JANUARY, A.D. 2000.

AND I\_DO\_HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES
HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NNB, INC."
WAS INCORPORATED ON THE TWENTIETH DAY OF OCTOBER, A.D. 1998.

00 JAN 13 PM 3: 03

Edward J. Freel, Secretary of State

AUTHENTICATION:

0189640

001012618

8300

2957395

DATE:

-01-10-00