

ACCOUNT NO. 072100000032 .

REFERENCE

AUTHORIZATION

\$ 70.00 COST LIMIT

ORDER DATE: April 7, 2000

ORDER TIME : 10:30 AM

ORDER NO. : 655625-015

800003210978--9

CUSTOMER NO: 5033667

CUSTOMER: Mr. Jasper Saunders

Pathnet, Inc.

1015 31 Street N.w.

Washington, DC 20007

FOREIGN FILINGS

PATHNET OPERATING, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

TRANSMITTAL LETTER

Division of Corporations	. 	1.6
SUBJECT: Pathnet Operating, Inc.	- ·	る を
(Name of corporation	on - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to to transact business in Florida.		
Please return all correspondence concerning this matter	to the following:	
(Name of	Person)	<u> </u>
(Firm/Co		
(Addr	ress)	
(City/Sta	ite/Zip)	<u> </u>
Should you need to call someone concerning this matte	r, please call:	
at (}	
(Name of Person) (Area () Code & Daytime Telephone	e Number)
STREET ADDRESS:	MAILING ADDRESS:	•
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Sec Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	ction
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	3 \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRAD 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.		perating, Inc.					
		poration; must include the word "INCORF eviations of like import in language as will					
		or partnership if not so contained in the na			poration instea	d of a	
	-	•	•	,			
2.	Delaware	<u>-</u>	3	54-1982971			
	(State or count	ry under the law of which it is incorporate	ted)	(FEI	number, if app	olicable)	
4.	April	06, 2000 5.	Perpetu	al			
	(D	ate of incorporation)	(Duratio	on: Year corp. wi	ll cease to exist	t or "perpetual")	
6.	Upon Qual:	ification				÷ ÷ ÷	
	(Date fir	st transacted business in Florida.) (SEE	SECTIONS	607.1501, 607.15	02 and 817.15	5, F.S.)	
7.	c/o NAJMA	KHAN, Suite LEVEL B, 11720	SUNRISE	VALLEY			
	RESTON, V	A 20191					 _
	*	(Current maili			· · · · · · · · · · · · · · · · · · ·		
TELECOMMUNICATION SERVICES To engage in any act or activity for which corporations may be organized.							
8.			,				
	(Purpos	e(s) of corporation authorized in home st	ate or coun	ry to be carried o	it in state of Fl	orida)	
9.	Name and s	treet address of Florida registered	agent: (P.	O. Box or Mail	Drop Box <u>NC</u>	OT acceptable)	
	Name:	Corporation Service Company				-	
	ivanic.		•		4	*	=
Of	ffice Address:	1201 Hays Street					
		Tallahassee		, Florida, 323	01		
				(Zip c			

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.

By: (Registered agent's signature)

Carol K. Dolor, Assistant Vice President

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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

an:	See attached officers/directors rider	ζ,
	CORS (Street address only - P.O. Box NOT acceptable) See attached officers/directors rider	
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(Typed or printed name and capacity of person signing application)

OFFICERS/DIRECTORS RIDER

ND-Application for Certificate of Authority

Pathnet Operating, Inc.

List of Officers

Name: RICHARD A. JALKUT Title: PRESIDENT

Bus. Addr.: c/o NAJMA KHAN 11720 SUNRISE VALLEY DRIVE, B, RESTON, VA 20191

Name: MARY McDERMOTT Title: SECRETARY

Bus. Addr.: c/o NAJMA KHAN 11720 SUNRISE VALLEY DRIVE, B, RESTON, VA 20191

Name: JAMES M. CRAIG Title: TREASURER

Bus. Addr.: c/o NAJMA KHAN 11720 SUNRISE VALLEY DRIVE, B, RESTON, VA 20191

List of Directors

Name: RICHARD A. JALKUT

Bus. Addr.: c/o NAJMA KHAN 11720 SUNRISE VALLEY DRIVE, B, RESTON, VA 20191

Name: MARY McDERMOTT

Bus. Addr.: c/o NAJMA KHAN 11720 SUNRISE VALLEY DRIVE, B, RESTON, VA 20191

Name: JAMES M. CRAIG

Bus. Addr.: c/o NAJMA KHAN 11720 SUNRISE VALLEY DRIVE, B, RESTON, VA 20191

State of Delaware Office of the Secretary of State

PAGE TO STATE OF

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PATHNET OPERATING, 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 THIRTEENTH DAY OF APRIL, A.D. 2000

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PATHNET OPERATING, INC." WAS INCORPORATED ON THE SIXTH DAY OF APRIL,

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES
HAVE NOT BEEN ASSESSED TO DATE.

Edward J. Freel, Secretary of State

AUTHENTICATION:

0378982

DATE:

04-13-00

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