

Jame**s** A. Curran Joseph J. Collopy Teresa Magee

IRA S. PIMM, JR. Consultant

## Corporation Guarantee and Trust Company

701 ARCHITECTS BUILDING

117 SOUTH 17TH STREET, PHILADELPHIA, PA 19103-5090
TELEPHONE (215) 563-6131 • FAX (215) 563-9410

March 6, 2000

Edwin F. Blanton, Esq. 825 Thomasville Road Tallahassee, FL 32303

**700003211677--7** -04/17/00--01129--032 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

RE: JIREHCOM, INC.

Dear Counselor:

Enclosed is Application for Authority, agent form and our \$78.75 check. Please sign in the usual place and file these papers as soon as possible.

Also enclosed is our \$35.00 check to cover the first year's representation fee. Please treat all correspondence in the usual manner. Thanks.

Cordially yours,

James A. Curran

President

JAC/as

Enclosure

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## 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.	JirehCom, Inc.	
	(Name of corporation: must include the word "INCOR words or abbreviations of like import in language as we natural person or partnership if not so contained in the	PORATED", "COMPANY", "CORPORATION" or vill clearly indicate that it is a corporation instead of a e name at present.)
2.	ILLINOIS (State or country under the law of which it is incorpor	3. 37–1392111
	(State or country under the law of which it is incorpor	3. 37-1392111 (FEl number, if applicable)
4.	12/09/1999 (Date of Incorporation)	5. PERPETUAL
	(Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6.	UPON QUALIFICATION	
	(Date first transacted business in Florida. (SEE SEC	TIONS 607.1501, 607.1502, AND 817.155, F.S.)
7.	2383 CENTENNIAL DRIVE	
		F.C
	WASHINGTON, IL 61571	
WASHINGTON, IL 61571 (Current mailing address)		
_		
8. TO PROVIDE TELECOMMUNICATION SERVICES  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)		
	Name and street address of Florida registere acceptable)	
	Name: EDWIN F. BLANTON	
Office Address: 825 THOMASVILLE ROAD		
	TALLAHASSEE	Florida 32303
TALLAHASSEE , Florida , 32303  (Zip Code)		
regi all : and	istered agent and agree to act in this capacity. statutes relative to the proper and complete p. accept the obligations of my position as regist (Registered age	nt's signature)
Č	Attached is a certificate of existence duly authored delivery of this application to the Department of official having custody of corporate records in tincorporated.	I NIGIR DV IDA NACEGIORI OF CINIC OF OFFICE

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12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: Address: \_\_ Vice Chairman: Address: \_ Director: RUSSELL L. HARRIS Address: 2383 CENTENNIAL DRIVE WASHINGTON, IL 61571 Director: RUSSELL B. TAYLOR 2383 CENTENNIAL DRIVE Address: WASHINGTON, IL 61571 B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: RUSSELL L. HARRIS Address: 2383 CENTENNIAL DRIVE WASHINGTON, IL 61571 Vice President: Address: Secretary: RUSSELL B. TAYLOR 2383 CENTENNIAL DRIVE Address: \_\_\_\_ WASHINGTON, IL 61571 Treasurer: RUSSELL B. TAYLOR Address: 2383 CENTENNIAL DRIVE WASHINGTON, IL 61571 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

File Number \_\_\_\_\_\_6079-326-3



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



## In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this \_\_\_\_\_\_\_ 3RD\_\_\_\_\_ day of \_\_\_\_\_\_ MARCH \_\_\_\_ A.D. \_\_\_\_\_2000\_\_.

Desse White

SECRETARY OF STATE