FOOOSAND AND A 884

Division of Corporations

SUBJECT: <u>Commonwealth Telecommunications of North America</u>, Inc. (Name of corporation - must include suffix)

	·						
Dear Sir or Madam:							
	on by Foreign Corporation for ", and check are submitted to forida.	register the above reference	d foreign corporation				
Please return all correspondent	ondence concerning this matte	er to the following:	-05/17/0001068003 ******87.50 ******43.75				
	Patricia	Cintron	manage (Carrow Carrow)				
	(Name o	of Person)	· · · · · · · · · · · · · · · · · · ·				
Como	nonwealth Telecom (Firm/C	munications of No	orth America, Inc.				
10	117 S Semoran Bl	ud Ste#204					
	(Add	lress)					
	Orlando, FL :	3Z8D구 tate/Zip)	- FM-284				
	(City/St	tate/Zip)	100				
		_	1 value () 23				
Should you need to call someone concerning this matter, please call:							
Patricia Cintron at (407) 381.9199							
(Name of Person) (Area Code & Daytime Telephone Number)							
STREET ADDRESS:		MAILING ADDRESS:	white the same of				
Qualification/Tax Lien S Division of Corporations 409 E. Gaines St.		Qualification/Tax Lien Son Division of Corporations P.O. Box 6327					
Tallahassee, FL 32399		Tallahassee, FL 32314					
Enclosed is a check for t	he following amount:		ILEI IT PN ARY OI SSEE,				
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certificate 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.

1.	(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead on natural person or partnership if not so contained in the name at present.)	or				
2.	Nevada (State or country under the law of which it is incorporated) 3. 88-044862 (FEI number, if applicable)	·O				
4.	(Date of incorporation) 5. perpetual (Duration: Year corp. will cease to exist or "perpetual")					
6.	April 15, ZDOD (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.	.)				
7.	1417 S. Semoran Blud # 204	The contract of the contract o				
	Orlando , FC 32807 (Current mailing address)					
	Tele communication (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 ad	ceptable)				
	Name: Oliver J. Frazier, III	SEC ALLE				
0:	ffice Address: 1417 S Semoran Blud #204	FI MAY IT RETAR AHASS				
		Y PH				
10). Registered agent's acceptance:	TILED 17 PM 4: 20 ARY OF STATE SSEE, FLORIDA				
th wi	aving been named as registered agent and to accept service of process for the above stated corporation is application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fith the provisions of all statutes relative to the proper and complete performance of my duties, and I ame e obligations of my position as registered agent. Registered agent's signature	further agree to comply				

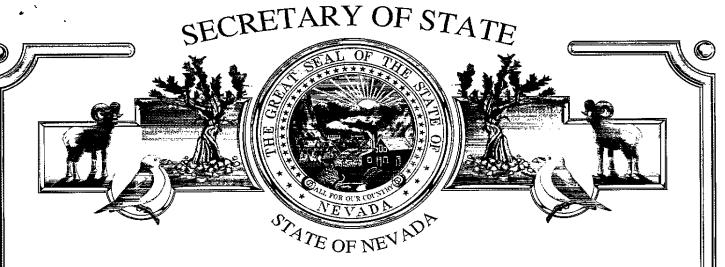
12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

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

A. DIRECT	ORS (Street address only - P.O. Box NOT acceptable)			
Chairmàn: _	Oliver J. Frazier, III			
Address:	1490 Shelter Rock Rd		<u></u>	.
	Orlando, Pl 32835			- -
Vice Chairm	an:			
Address:				-
				
Director:			- +	_ ; :=
Address:				= 1
Director: _			· · · · · · · · · · · · · · · · · · ·	
Address: _	, , , , , , , , , , , , , , , , , , ,		, e.	 -
B. OFFIC	ERS (Street address only - P.O. Box NOT acceptable)			
President: _	Oliver J. Frazier			- <u>-</u>
Address: _	1490 Shelter Rock Rd	,		
_	Orlando, FL 32835		-	· · · · · · · · · · · · · · · · · ·
Vice Preside	ent: Mauricio Proano			
Address: _	2248 Wyndam Way	= = = = = = = = = = = = = = = = = = = =		-
_	Kissimmee, FL 34743		00 MA	 · .
Secretary:	Patricia Cintron	HA SS	7 -	
Address: _	1490 Shelter Rock Rd	RY OF	3 0	 .
_	Orlando, FL 32835		<u> </u>	_ _ .
Treasurer:	Patricia Cintron	<u> </u>	20	
Address: _	1490 Shelter Rock Rd			<u>.</u> ,a.
	Orlando Fl 32835		-	 .
NOTE: 1	f necessary, you may attach an addendum to the application listing additional officers and/or of	lirectors.		
13	Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the appli	ication)		·
	Patricia Cintron - Secret			
14	(Typed or printed name and capacity of person signing application)			



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **COMMONWEALTH TELECOMMUNICATIONS OF NORTH AMERICA**, **INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 20, 2000, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on May 4, 2000.

Secretary of State

By ACQUEIUME Certification Clerk