SIGNATURE:

FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 28, 2002 8:00 am Secretary of State F01000001333 DOCUMENT # 1. Entity Name 05-28-2002 91775 005 ***150.00 SAGE TELECOM, INC. Principal Place of Business Mailing Address 805 CENTRAL EXPRESSWAY, SUITE 100 805 CENTRAL EXPRESSWAY. SUITE 100 DULLUMEN ALLEN TX 75013-2789 ALLEN TX 75013-2789 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For NOT APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 EAST PARK AVENUE TALLAHASSEE FL 32301 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. (9/01) ☐ Delete TITLE ☐ Change Addition HOULIHAN, DENNIS M NAME CR2E034 STREET ADDRESS STREET ADDRESS 805 CENTRAL EXPRESSWAY, SUITE 100 CITY-ST-ZIP CITY-ST-ZIP ALLEN TX 75013-2789 ☐ Delete Change ☐ Addition TITLE TITLE VCFO NAME NAME WILLIAMS, CHRISTOPHER M. STREET ADDRESS STREET ADDRESS 805 CENTRAL EXPRESSWAY, SUITE 100 CITY-ST-ZIP CITY-ST-ZIP ALLEN TX 75013-2789 ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME GIMNICH, JERRY L STREET ADDRESS STREET ADDRESS 805 CENTRAL EXPRESSWAY, SUITE 100 CITY-ST-ZIP CITY-ST-7IP ALLEN TX 75013-2789 ☐ Change ■ Addition TITLE Delete TITLE NAME NUTTALL, GARY P NAME STREET ADDRESS 805 CENTRAL EXPRESSWAY, SUITE 100 STREET ADDRESS CITY-ST-ZIP ALLEN TX 75013-2789 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME KENNEDY, JAMES E JR. NAME STREET ADDRESS 805 CENTRAL EXPRESSWAY, SUITE 100 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ALLEN TX 75013-2789 TITLE ☐ Delete Change Addition TITLE DAVIS, JOE NAME NAME STREET ADDRESS 805 CENTRAL EXPRESSWAY, SUITE 100 STREET ADDRESS CITY-ST-ZIP ALLEN TX 75013-2789 CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and fad urate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation the receiver or trustee empowered to be cute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attention and other like empowered.

SIGNING OFFICER OR DIRECTOR

SIGNING OFFICER OR DIRECTOR

Date

Da SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF