

CT CORPORATION SYSTEM

F01000003383

FILED
JUN 25 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

Valta Communications, Inc.

600004439586--5
-06/25/01-01115-002
*****70.00 *****70.00

600004439586--5
-06/25/01-01115-003
*****8.75 *****8.75

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of RA |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> UCC |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Photocopies | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Will Wait | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

RECEIVED
JUN 25 PM 1:57
DIVISION OF CORPORATION

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

6/25/01

Order#: 4575698

Ref#: **BK**

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**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*

FILED
JUN 25 PM 2:58
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

1. Valta Communications, Inc.

(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.)

2. Louisiana

(State or country under the law of which it is incorporated)

3. 72-1472071

(FEI number, if applicable)

4. 04/10/2000

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qual

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 5158 Interstate Drive, Suite 309, Shreveport, LA 71109

(Principal office address)

same

(Current mailing address)

Telecommunications field work. Upgrading equipment in cell sites.

8. _____
(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)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

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: _____

C T Corporation System

(Registered agent's signature)

Michael E. Jones
Assistant Secretary

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 business addresses of officers and/or directors:

A. DIRECTORS

SEE ATTACHMENT

Chairman: Dustin I. Thompson

Address: 5158 Interstate Drive, Suite 309

Shreveport, LA 71109

Vice Chairman: _____

Address: _____

Director: James Heath Stevens

Address: 5158 Interstate Drive, Suite 309

Shreveport, LA 71109

Director: Charles C. Grubb

Address: 400 Travis Street, Ste. 1805

Shreveport, LA 71101

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

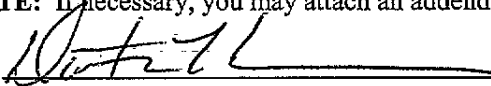
Address: _____

Treasurer: _____

Address: _____

SEE ATTACHMENT

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dustin I. Thompson, President

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

FILED
JUN 25 PM 2:58
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Attachment to Florida
Application By Foreign Corporation for Authorization to Transact Business In Florida

Officers & Directors

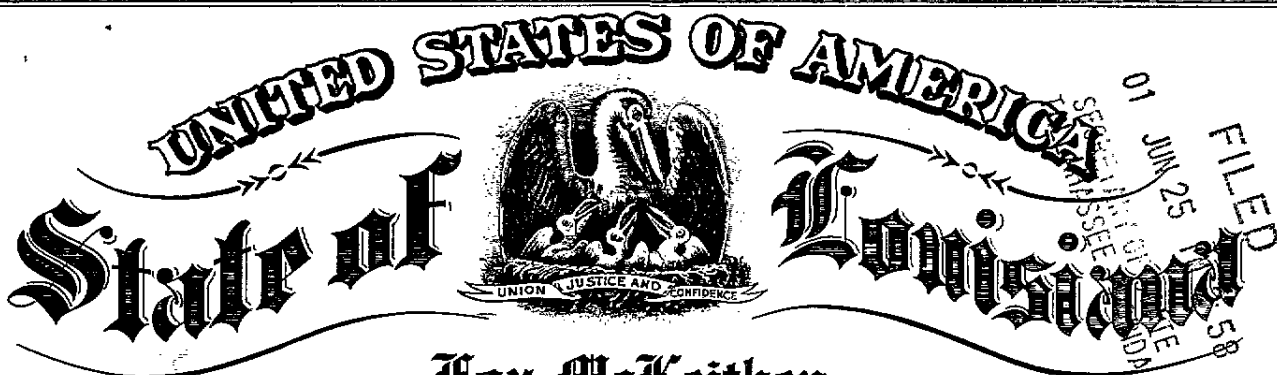
FILED
01 JUN 25 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Full Name: Dustin I. Thompson
Officer/Director: Officer, Director
Officer's Title: CEO
Director's Title: Chairman
Business Address: 5158 Interstate Drive, Suite 309
City: Shreveport
State: LA
ZIP Code: 71109

2. Full Name: James Heath Stevens
Officer/Director: Officer, Director
Officer's Title: COO
Director's Title: Other Director
Business Address: 5158 Interstate Drive, Suite 309
City: Shreveport
State: LA
ZIP Code: 71109

3. Full Name: Charles C. Grubb
Officer/Director: Director
Director's Title: Other Director
Business Address: 400 Travis Street, Ste. 1805
City: Shreveport
State: LA
ZIP Code: 71101

4. Full Name: Benjamin A. Miller
Officer/Director: Director
Director's Title: Other Director
Business Address: 2800 Youree Drive, Ste. I-240
City: Shreveport
State: LA
ZIP Code: 71104



Jox McKeithen

SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

VALTA COMMUNICATIONS, INC.

A LOUISIANA corporation domiciled at SHREVEPORT,

Filed charter and qualified to do business in this State on
April 10, 2000,

I further certify that the records of this Office indicate
the corporation has paid all fees due the Secretary of
State, and so far as the Office of the Secretary of State is
concerned is in good standing and is authorized to do
business in this State.

I further certify that this Certificate is not intended to
reflect the financial condition of this corporation since
this information is not available from the records of this
Office.

*In testimony whereof, I have hereunto set
my hand and caused the Seal of my Office
to be affixed at the City of Baton Rouge on,*

June 13, 2001

Jox McKeithen

BRI 34923436D

Secretary of State

