FCICCCOGGITTIS

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	40004700454- -11/30/0101057(*****78.75 ******			
SUBJECT: WS TELECOM, INC.				
	ration - must include suffix)			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation "Certificate of Existence", and check are submitted to transact business in Florida.	for Authorization to Transact Business in Florida", I to register the above referenced foreign corporation			
Please return all correspondence concerning this m	atter to the following:			
SHEREE WEST				
	ue of Person)			
NOWALSKY, BRONSTON & GOTHARD, APLLC				
	/Company)			
•	• •			
3500 NORTH CAUSEWAY BLVD., SUITE 1442	Address)			
·	3000			
METAIRIE, LOUISIANA 70002	oto and 7in code			
(Chy/Su	ate and Zip code)			
Par forth an information community at his most an along all				
For further information concerning this matter, please call:				
SHEREE WEST at (504) 832-1984 SSET OF THE PROPERTY OF THE PROPERT			
ut (===	rea Code & Daytime Telephone Number			
	. Lo. S.			
	RA W			
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
409 E. Gaines St.	P.O. Box 6327			
Tallahassee, FL 32399	Tallahassee, FL 32314			
409 E. Gaines St. Tallahassee, FL 32399 P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:				
☐ \$70.00 Filing Fee ☑ \$78.75 Filing Fee & Certificate of Statūs	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy Certificate of Status &			

Certified 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. WS TELECO	DM, INC.			
(Name of corpo words or abbre		earl	ED", "COMPANY", "CORPORATION" or y indicate that it is a corporation instead of a present.)	· = .
2. MISSISSIPPI	I	3.	64-0937496	
(State or country	y under the law of which it is incorporated)		(FEI number, if applicable)	•
4. FEBRUARY 8	3, 2001 ₋	5.	PERPETUAL	
(Da	te of incorporation)	•	(Duration: Year corp. will cease to exist or "perpetual")	-
6. UPON QUAL				,
(Date first trans			t transacted business in Florida, insert "upon qualification.") 1, 607.1502 and 817.155, F.S.)	
72506 LAKEL	AND DRIVE, SUITE 405			
	(Principal office	add	ress)	
FLOWOOD, I	MISSISSIPPI 39232			
	(Current mailing	add	ress)	
(Purpose		or co		71
Name:	NRAI Services, Inc.		ARY SSI	一
Office Address:	526 E. Park Avenue			
	Tallahassee			
	(City)		Florida 32301 (Zip code) (Zip code) (Zip code)	
Having been na designated in th further agree to duties, and I am	is application, I hereby accept the appo comply with the provisions of all status familiar with and accept the obligation NRAI Services, Inc. By:	oint tes ns c	rice of process for the above stated corporation at the ment as registered agent and agree to act in this cape relative to the proper and complete performance of not my position as registered agent.	icity. I
:	(Registered agent SEE ATTACHED	t's s	ignature)	

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.

ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT

NRAI Services, Inc. having been named as registered agent and to accept service of process for the aforementioned corporation at the place designated in this application, hereby accepts the appointment as registered agent and agrees to act in this capacity. NRAI Services, Inc. further agrees to comply with the provisions of all statutes relative to the proper and complete performance of its duties, and NRAI Services, Inc. is familiar with and accepts the obligations of its position as registered agent.

Dated: 11/20/01

NRAI Services, Inc.

Charles A. Coyle - Assistant Secretary

Charles A Corle

O1 NOV 30 PM IO: 10
SECRETARY OF STATE

12. Names and business addresses of officers and/or directors:

A. DIRECTORS		
Chairman: WADE SPOONER		
Address: 2506 LAKELAND DRIVE, SUITE 405`		
FLOWOOD, MS 39232	-	
Vice Chairman:		
Address:		, t-"
Director: TED PARSONS		- ,
Address: 2506 LAKELAND DRIVE, SUITE 405		·
FLOWOOD, MS 39232		en en agric
Director:		=
Address:		
B. OFFICERS		
President: WADE SPOONER	·	•
Address: 2506 LAKELAND DRIVE, SUITE 405	·	-,
FLOWOOD, MS 39232		
Vice President: TED PARSONS		
Address: 2506 LAKELAND DRIVE, SUITE 405`		
FLOWOOD, MS 39232		:
Secretary:	FINANCE S	
Address:	EFO I	~ <u>.</u>
Treasurer:	PLO STA D	
Address:	DA I	
NOTE: If necessary, you may attach an addendum to the application listing additional offic	eers and/or directors.	
13. World from		
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of WADE SPOONER, CHAIRMAN/PRESIDENT	of the application)	
(Typed or printed name and capacity of person signing application)		

State of Mississippi

Secretary of State's Office Eric Clark

Secretary of State Jackson, Mississippi

CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as—such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on February 08,2001 the state of Mississippi issued a Charter/Certificate of Authority to:

WS TELECOM, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is Perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

Given under my sand and seal of office O

Eric Clark

ERIC CLARK, Secretary of State

