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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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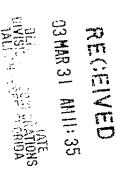
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SECRETARY SC STATE

CT CORPORATION

March 31, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5794663 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

USA Mobility, Inc. (CO) Qualification Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Katrina Forsman Fulfillment Specialist

Katrina_Forsman@cch-lis.com

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

	CE WITH SECTION 607.1503, FLORID OREIGN CORPORATION TO TRANSA				0 <i>TO</i>	
1. //SA M (Name of corp words or abbro	on the ty Inc oration; must include the word "INCORPOI eviations of like import in language as will c or partnership if not so contained in the name	RATED	", "COMPANY", "CORPORATIOn dicate that it is a corporation inste	DN" or		
2. Colora	6	3	05-0547679			
(State or countr	y under the law of which it is incorporated)		(FEI number, if appli	ickble)		
4. 1/27	1200 3	5.	Perpetual	;		
	te of incorporation)	(Duration: Year corp. will cease to	exist or "perp	ctual")	
6. (1,00)	n qualification acted business in Florida. If corporation ha	a not in	ongo tad husinass in Worlds insart	Since qualific	ration ")	
(Date Hat Hans	(SEE SECTIONS 607.	1501, 6	607.1502 and 817.155, F.S.)	Michou domine	- 	
7. 409 N.	Tejon Street / olorad (Principal office	o S	orings, CO 8090	15		
5			- ,			
<u>Janua</u>	(Current mailing	addres	(8)	***		
8. Retail S	sale of durable medic	or coun	equipment	ida)		
9. Name and st	rect address of Florida registered age	ent: (P	O. Box or Mail Drop Box <u>NO</u>	acceptable	س :	
Name:	C T Corporation System		 .			$\neg \Box$
Office Address:	1200 South Pine Island Road,			ASE	HAR 31	
				* 55	<	'n
	Plantation, (City)		, Florida 33324	上	22	
	(Chy)		(Zip code)	02	် နှ	
	agent's acceptance:			P.	1 1/2	_
designated in the further agree to	med as registered agent and to accept s is application, I hereby accept the appo comply with the provisions of all status	intme tes rela	nt as registered agent and agreative to the proper and complet	i to act in the	is capac	ity. I
auties, and I am	familiar with and accept the obligation	-	- ·· · · · · · · · · · · · · · · · · ·	. ·		
•	C T Corpor	ation S	ystem	f ;		
Ву	: Takel D. Malon	La		<u> </u>		
	(Registered agent	's sign	ature)	[:		
11. Attached is a	certificate of existence duly authentica	ted, no	ot more than 90 days prior to del	livery of this	applicat	ion 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.

1AR-10-2003 16:51	3 8 3 629 2525 ° P.05/05
	v 2
12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman: Patrick Mahnche	•
Address: 409 N. Tejon St	
Colorado Springs, CO 80903	
Vice Chairman:	
Address:	
	•
Director:	<u> </u>
Address:	
	7
Director:	
Address:	
B, OFFICERS	4
President: Patrick Mahnche	
Address: 4090. Tejon Street	<u> </u>
Colorado Springs, co 80903	15
Vice President: Kelly Mahncke	4
Address: 469 D. Tejon Street	
Colorado Springs, CO 80903	1
Secretary: Breezo Mahincho	
Address: 409 N. Tejon Street Colorado Sprin	95, 60 80903
Treasurer: Braco Mahnake	<u>i</u>
Address:	i
NOTE: If necessary, you may attach an addendum to the application listing add	litional officers and/or directors.
13. Mullecule (Signature of Chairman, Vice Chairman, or any officer listed in	number 12 of the ambigation
14. Patrick Mohnake - chairman	nonzor 12 of the approaches)
(Typed or printed name and capacity of person signing a	application)
FL019 - 12/17/02 C T System Online	40 mg (1 mg



STATE OF COLORADO

DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

USA MOBILITY, INC (Colorado CORPORATION) File # 20031030185

was filed in this office on January 27, 2003 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: February 24, 2003

For Validation:

Certificate ID: 641294

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

Nonetta Jacreson SECRETARY OF STATE