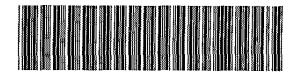
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(Re	equestor's Name)		
, (Ad	(dress)		
(Ad	dress)	·	
(Cit	y/State/Zip/Phone	• #)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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AHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Westchester Telecom, Inc.
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Hope Halpem
(Name of Person)
Westchester Telecom, Inc.
1 North Broadway (Firm/Company)
(Address)
White Plains, New York 10601
(City/State and Zip code)
For further information concerning this matter, please call:
Hope Halpern at (914) 729-5543
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy 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. Westches	ter Telecom, Inc.		J. Z .
words or abbrev	oration; must include the word "INCORPORA viations of like import in language as will clear or partnership if not so contained in the name	arly	indicate that it is a corporation instead of a
2. New York		3.	30-0127176
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)
411/05/20	002	5.	perpetual 6
(Dat	te of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
6. upon qua	lification		
(Date first transa	cted business in Florida. If corporation has (SEE SECTIONS 607.15	not 501,	transacted business in Florida, insert "upon qualification.") 607.1502 and 817.155, F.S.)
7. One Nort	h Broadway, 5th Floor White Plair	ns,	NY 10601
	(Principal office a	ıddı	ess)
Same as	above		
	(Current mailing a	iddr	ess)
Δ.	unications service provider		
(Purpose)	(s) of corporation authorized in home state or	cot	untry to be carried out in state of Florida)
9. Name and str	<u>eet address</u> of Florida registered agen	it: ((P.O. Box or Mail Drop Box NOT acceptable)
Name:	NRAI Services, Inc.		
Office Address:	526 E. Park Avenue		
	Tallahassee		Florida 32301
•	(City)		(Zip code)
Having been nan designated in thi further agree to t	s application, I hereby accept the appoi	ntm es re s of	Inc
	(Registered agent's	s sig	(nature)

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	
Chairman: Constantin Barbulescu	
Address: 1 North Broadway, 5th Floor White Plains, New York 10601	_
ب ے	
Vice Chairman: Joseph Guariglia Address: 1 North Broadway, 5th Floor White Plains, NY 10601	_
Address: 1 North Broadway, 5th Floor White Plains, NY 10601 Menachem Ash	<u> </u>
The state of the s	4
Director: Menachem Ash	
Address: 1 North Broadway, 5th Floor White Plains, NY 10601	<u>'S</u>
Director:	_
Address:	_
B. OFFICERS	_
President: Joseph Guariglia Address: 1 North Broadway, 5th Floor White Plains, NY 10601	_
Vice President: Constantin Barbulescu	_
Address: 1 North Broadway, 5th Floor White Plains, NY 10601	_
Secretary: Menachem Ash	_ _
Address: 1 North Broadway, White Plains, NY 10601	
Treasurer: Louise Moses	_
Address: 1 North Broadway 5th Floor, White Plains, NY 10601	_
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) Joseph Guariglia	_
(Typed or printed name and capacity of person signing application)	_

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of WESTCHESTER TELECOM, INC. was filed on 11/05/2002, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 07th day of May two thousand and three.

Secretary of State

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