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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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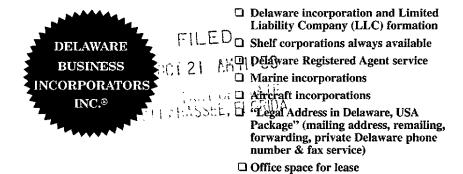
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ALT;

Capitol Office Center 3422 Old Capitol Trail, Suite 700 Wilmington, DE 19808-6192 (USA)

Tel: 302.996.5819 Fax: 302.996.5818 Toll Free (USA & Canada, only): Tel: 1.800.423.2993

Fax: 1.800.423.0423 E-mail: inc_info@delbusinc.com Internet: http://www.delbusinc.com



October 16, 2003

Florida Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: PHASEONE COMMUNICATIONS, INC. - #10744

Dear Secretary of State:

Please find enclosed the following documents:

Application for Authority to register a foreign corporation Filing Fee State of Delaware original official document (if required)

Please file these documents accordingly and return them to me along with a Certified Copy at the address above on this letterhead or in the enclosed pre-addressed envelope.

Any questions concerning this filing, you may reach me directly at 800-423-2993.

Thank you,

Lori M. Whitlock
General Manager

Enclosures

TRANSMITTAL LETTER

FILED 03 OCT 21 AM II: 53

Certified Copy

TO: Registration Section			
Division o	f Corporations		TALLAHASSFE, FLORIDA
SUBJECT: P	haseone Communications,		
	(Name of corpo	oration - must include suffix)	
Dear Sir or Madan	1:		
	stence", and check are submitted	n for Authorization to Transact Busine d to register the above referenced forei	
Please return all co	rrespondence concerning this m	natter to the following:	
Lori Whitlock			
	(Nan	ne of Person)	<u> </u>
Delaware Bus	siness Incorporators, Inc.		
	(Firm	n/Company)	
3422 Old Cap	oitol Trail, Suite 700		
	(Address)	
Wilmington, E	DE 19808		
	(City/S	tate and Zip code)	. *
For further inform	ation concerning this matter, ple	ease call:	
Lori Whitlock	at (3	02 , 996 5819	
(Name of	Person) (A	rea Code & Daytime Telephone Num	ber)
STREET ADDRI Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 3 Enclosed is a chec	on rations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
□ \$70.00 Filing F	ee	•	.50 Filing Fee, rtificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

O3 OCT 21 AMILES TO COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Phaseone 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.) (State or country under the law of which it is incorporated) December 2, 1999 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") Upon Authorization from Florida (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.) 2039 N. Meridian Road, #113, Tallahassee, FL 32303 (Principal office address) 2039 N. Meridian Road, #113, Tallahassee, FL 32303 (Current mailing address) 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) Darlene Duran Name: Office Address: 2039 N. Meridian Rd., #113 Tallahassee (City) 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.

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:	E11
A. DIRECTORS	FILED
Chairman: Michael du Pont	03 OCT 21 MIII: 50
Address: 2210 Pearl Beach Road	INTERPORT FLOOR
Olympia, WA 98502	* ' ~~!\!{ <i>!</i> !
Vice Chairman:	
Address:	
Director:	
Address:	<u> </u>
	·
Director:	
Address:	
B. OFFICERS	
President: Joanne Moxham	
Address: 22200 Hartland	
Canoga Park, CA 91303	
Vice President:	
Address:	
	· · · · · · · · · · · · · · · · · · ·
Secretary: Terrence Villines	-
Address: 2424 S. Holt Ave, Los Angeles, C.	A 90034
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officer	s and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	the application)
14. Joanne Moxham, President	
(Typed or printed name and capacity of person signing application)	

Delaware

PAGE 1

FILED

03 OCT 21 AMII: 53

LATT SHASSI'E, FLORIDA

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PHASEONE COMMUNICATIONS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

3133158 830 030665496

OCTOBER, A.D. 2003.

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 2693264

DATE: 10-16-03