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DIVISION OF CORPORATIONS

CT CORPORATION

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Florida Department of State
Division of Corporations
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FOREIGN PROFIT QUALIFICATION

NECA Services, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NECA Services, 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:

Carol Kerner, CFO

(Name of Person)

NECA Services, Inc.

(Firm/Company)

80 South Jefferson Road

(Address)

Whippany, NJ 07981

(City/State and Zip code)

For further information concerning this matter, please call:

Carol Kerner

(Name of Person)

at (973

) 884-8502

(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 6337
Tallahassee, FL 32314

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Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
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. NECA Services, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 22-3741663
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 30, 2000 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 80 South Jefferson Road Whippany, NJ 07981
(Principal office address)

same as above
(Current mailing address)

8. Government Program Administration
(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 NOT acceptable)

Name: CT 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.

CT Corporation System

By: Michael J. Smith Michael J. Smith, Asst. Secretary
(Registered agent's signature)

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:

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TALLAHASSEE, FLORIDA

A. DIRECTORSChairman: see attached list

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERSPresident: see attached list

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Carol Kenner, CFO

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

**NECA Services Inc.
2005 Board of Directors & Officers**

Board of Directors	
Charles B. Gill 1496 Oakmont Place Niceville, Florida 32578 Tel: (850) 897-3595 FAX Machine: (850) 897-8006 Contact number: (850) 897-3595 Cell: (828) 964-8559 E-Mail Address: nicegill@aol.com	Hobart G. Davis 496 Laurel Ridge Road Fleetwood, NC 28626 Tel: (336) 877-6996 FAX Machine: (336) 877-5555 E-Mail Address: chair@infoave.net
Wayne S. Thomas President Pattersonville Telephone Co. 1309 Main Street Rotterdam Junction, NY 12150 Business: (518) 887-2121 FAX Machine: (518) 887-3299 Contact Number: (518) 887-2121 E-Mail: w@ptconnect.net	Curtis A. Sampson Chairman & CEO Hector Communications Corporation 211 South Main Street P.O. Box 428 Hector, MN 55342-0428 Business: (320) 848-6611 FAX Machine: (320) 848-2702 E-Mail: curtiss@commvsinc.com
Gerald (Jerry) Levenske N 5354 County Road F Durand, WI 54736 FAX Machine: (715) 672-4344 Tel: (715) 672-4100 Cell: (715) 495-6060 E-mail: jerry@nelson-rl.net	
Officers	
John Parry, President & CEO NECA Services, Inc. 100 South Jefferson Road Whippany, NJ 07981 Business: (973) 884-8060 E-mail: jparry@necaservices.com	Carol Kenner, CFO NECA Services, Inc. 80 South Jefferson Road Whippany, NJ 07981 Business: (973) 884-8502 E-mail: ckenner@necaservices.com

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Delaware

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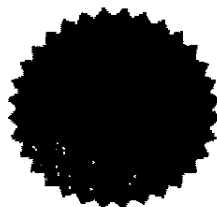
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NECA SERVICES, 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 ELEVENTH DAY OF JANUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

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TALLAHASSEE, FLORIDA



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 3611435

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DATE: 01-11-05

TOTAL P.06