# F0500000 6518

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

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# FILEE

### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Alpha Communications	, Inc			
	orporation - must include suffix)			
Dear Sir or Madam:				
	ation for Authorization to Transact Business in Florida," itted to register the above referenced foreign corporation to			
Please return all correspondence concerning th	is matter to the following:			
Willaim A. DeGironemo				
	Name of Person)			
Alpha Communications, Inc.				
(Firm/Company)				
1321 Tower Road				
	(Address)			
Schaumburg, IL 60173				
(Ci	ty/State and Zip code)  Aleccar sells			
For further information concerning this matter, please call:				
William A. DeGironemo at (	847 ) 885-9920 프유 꽃			
(Name of Person)	847 ) 885-9920  (Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	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				

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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 29, 2005

WILLIAM A. DEGIRONEMO 1321 TOWER ROAD SCHAUMBURG, IL 60173

SUBJECT: ALPHA COMMUNICATIONS, INC.

Ref. Number: W05000044976

We have received your document for ALPHA COMMUNICATIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 105A00059338

# 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.

(Enter name of c	munications, Inc. orporation; must include "INCORPORATED	," "COMPANY," "CORPORATION,"	
	orp," "Inc," "Co," or "Corp.")		
Alpha Wire			
		e adopted for the purpose of transacting business in Flor	ida)
2. Illinois		36-3696638	
_	under the law of which it is incorporated)	(FEI number, if applicable)	
4. March 12,		Perpetual	
-	of incorporation)	(Duration: Year corp. will cease to exist or "perpetua	ıl")
6. August 1s			
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7. 1321 Towe	er Road, Schaumburg, IL 60	173	
<del></del>	(Principal office add	lress)	
_1321 Tow	er Road, Schaumburg, IL 6	60173	
	(Current mailing add	lress)	<del></del>
Dotali Oal			
	es of Wireless Handset	CT 1	
(Purpose(s	) of corporation authorized in home state or c	ountry to be carried out in state of Florida;	
<ol><li>Name and stree</li></ol>	t address of Florida registered agent: (P.0	O. Box NOT acceptable)	
Name:	NRAI Services, Inc.	AA	05 }
Office Address:	2731 Executive Park Dr., S	Suite 4 문항	05 NOV -8 AMI
	Weston	, Florida 33331	-8 A
	(City)	(Zip code)	
10. Registered ag	ent's acceptance:	語音	=
Having been name	ed as registered agent and to accept servi	ice of process for the above stated corporation at t	he ptdce
further agree to co	emply with the provisions of all statutes r	ment as registered agent and agree to act in this co relative to the proper and complete performance o	ipacity. 1 f my duties,
	with and accept the obligations of my po	sition as registered agent.	
	RAI Service, Inc.		
<u></u>	4: Christi- Elahra · Asst. 5	ccretary 11-63 zccs	
	(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:

A. DIRECTORS			
Chairman: William DeGironemo			
Address: 1321 Tower Road			
Schaumburg il 60173			
Vice Chairman:		<u> </u>	
Address:			—
Director:			
Address:			
Director:			
Address:			
B. OFFICERS  President: William DeGironemo			
Address: 1321 Tower Road			
Schaumburg IL 60173			
Vice President:			
Address:	SECRETA	OS NOV -1	 
Secretary:	SHE C		
Address:	- ST - ST	=	_
Treasurer:	景	8	_
Address:			
NOTE: If necessary, you may attach an add to the application listing additional officers and/o	or directors.		
13. Milliamme Le feronino	<del></del>		
(Signature of Director or Officer listed in number 12 of the application)  William DeGironemo. CEO			



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

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my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of SEPTEMBER A

2005



Desse White