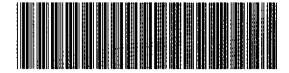
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(Requestor's Name)
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PICK-UP WAIT MAIL
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SECRETARY OF STATE

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WH-482)

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Communications Administrative Services, Inc. Name of corporation - must include suffix
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," or "Certificate of Good Standing" 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:
Greg Boyette
Name of Person
Communications Administrative Services, Inc.
Firm/Company
3800 Hwy 39 N
Address
Meridian MS 39301 City/State and Zip code
gboyette@adminins.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Greg Boyette at (601) 693-8357 Ext. 363
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\ \times \text{Certificate of Status} \tag{S78.75 Filing Fee & Certified Copy} \tag{\$87.50 Filing Fee, Certificate of Status & Certified Copy} \tag{Certified Copy}



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 10, 2011

DALVIN K. PARKER****3RD ML****
3800 HWY 45 N
MERIDIAN, MS 39301

SUBJECT: COMMUNICATIONS ADMINISTRATIVE SERVICES, INC.

Ref. Number: W11000004827

We have received your document for COMMUNICATIONS ADMINISTRATIVE SERVICES, 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 registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 611A00002183

www.sunbiz.org

Diricina of Communitions D.O. DOV 6207 Tollaharras Elavida 2021

Communications Administrative Services, Inc.

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.

76	11 : 51 /1				
	ible in Piorida, enter alternate corporate na		adopted for the purpose of transacting busine	ss in Flori	da)
Mississippi	under the law of which it is incorporated)		27-0815174		
	uniter the law of which it is incorporated)		(FEI number, if applicable)		
6/26/09		5.	Perpetual		•
(Date	of incorporation)		(Duration: Year corp. will cease to exist or	"perpetua	l")
•					
	•		n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
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(Purpose(nal employer organization s) of corporation authorized in home state	or co	ountry to be carried out in state of Florida)	™ €	PH 5
(Purpose(. Name and <u>stre</u> Name:	nal employer organization s) of corporation authorized in home state et address of Florida registered agent:	or co	ountry to be carried out in state of Florida)	<u> </u>	PH 5
(Purpose(nal employer organization s) of corporation authorized in home state et address of Florida registered agent: CT Corporation	or co	ountry to be carried out in state of Florida)	<u> </u>	PH 5

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.

James M. Halpin

James M. Halpin

Assistant 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: A. DIRECTORS Chairman: Dalvin K. Parker Address: 3800 Hwy 45 N Meridian MS 39301 Vice Chairman: Address: Address: Director: Address: **B. OFFICERS** President: Dalvin K. Parker Address: 3800 Hwy 45 N Meridian MS 39301 Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. Dalvin K. Parker

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

State of Mississippi

Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on June 26, 2009, the State of Mississippi issued a Charter/Certificate of Authority to:

COMMUNICATIONS ADMINISTRATIVE SERVICES, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Windrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand and seal of office December 8, 2010

C. Delbert Hosemann, Jr. Secretary of State

Certification Number: 12303693-1 Page 1 of 1 Reference: Greg Boyette - NHM Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp