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(Requestor's Name)					
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Certified Copies	Certificates	of Status			
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SECRETARY OF STATE
TALLAHASSEE, FI OBJE

W1157776

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: _intertel. 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," 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:
Derek DeRossett Name of Person
Intertel, Inc.
Firm/Company
6565 South Dayton Street, Suite 2100
Address
Greenwood Village, CO 80111
City/State and Zip code
ddanaacht (Rimhantainn anns
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ARE ARE SECTION ASSET TO A SECTION
Derek DeRossett st. (1720) 457 1090 m
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clifton Building Division of Corporations P.O. Box 6327 Clifton Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\frac{1}{2}\$78.75 Filing Fee \$\frac{1}{2}\$Certificate of Status \$\frac{1}{2}\$Certified Copy \$\frac{1}{2}\$Certified Copy \$\frac{1}{2}\$Certified Copy \$\frac{1}{2}\$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.

_Missouri Inte			adopted for the purpose of transacting b	usiness in Florida)	
	under the law of which it is incorporated		(FEI number, if applicable)		
December 3 (Date	. 1992 of incorporation)	_ 5.	5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")		
N/A	(SEE SECTIONS 607.1501 &	607.13	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
	Towne Square, Suite 303, St. Lo. (Principal office) (Current mailir	ce add	ress)		
	(Curon main	ig add	1005)	51	
insurance in	vestigations			ALL SEC	
(Purpose(s) of corporation authorized in home state	e or co	ountry to be carried out in state of Florida		
vame and stree	t address of Florida registered agent:	: (P.C	D. Box NOT acceptable)	2011 NOV -7 SECRETARY E ALLAHASSEE	
Name:	NRAI Services, Inc.			7.	
\ddress:	515 East Park Avenue			# :	
	Tallahassee (City)		, Florida <u>32301</u> (Zip code)		
nam this	application, I hereby accept the app	oointn	ce of process for the above stated con nent as registered agent and agree to elative to the proper and complete pe	o act in this capacit	

ficate of existence duly authenticated, not more than 90 days prior to delivery of this application to , by the Secretary of State or other official having custody of corporate records in the jurisdiction it is incorporated.

(Registered agent's signature)

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. Intertel,	Inc.			
	of corporation; must include "INCORPORAT	ED," "COMPANY," "CORPORATION,"		
"Inc.," "Co.,	," "Corp," "Inc," "Co," or "Corp.")			
		•		
	i Intertel, Inc.			
(If name un	available in Florida, enter alternate corporate na	ime adopted for the purpose of transacting busi	ness in Florida)	
2Missouri		3. 43-1636426		
	intry under the law of which it is incorporated)	(FEI number, if applicable)		
(23	, , , , , , , , , , , , , , , , , , ,	(t 21 names), ii appireasis	,	
4. December	er 3, 1992	5. Perpetual		
((Date of incorporation)	(Duration: Year corp. will cease to exist	or "perpetual")	
< A14A				
6. <u>N/A</u>	(Data California de Albaria	- 1. Flad 4. (for the control of the form)		
	(SEE SECTIONS 607 1501 & 60	ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)		
74.	. (BEE SECTIONS 607,1501 & 60	7.1502, 1.5., to determine penalty hability)		
7. 11116 So	uth Towne Square, Suite 303, St. Louis	Missouri 63123		
	(Principal office			
	(6		 	
	(Current mailing	address)		
			A ∞ ≥	
8. Insurance	e Investigations		F6 =	
(Ригре	ose(s) of corporation authorized in home state of	r country to be carried out in state of Florida)	NOV -	
			AS AS	
9. Name and	street address of Florida registered agent: (P.O. Box NOT acceptable)	SE SE	
			inc — mar	
Name	e: <u>NRAI Services, Inc.</u>			
000 111	5455		85 f	
Office Addres	ss: 515 East Park Avenue		कारा 🗝	
	Tallahassee	, Florida <u>32301</u>	, 	
	(City)	(Zip code)		
	(City)	(Zip code)		
10 Registere	ed agent's accentance			

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.

NRAT Services, Inc.

by: Christian Eubanks, 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: Address: __ Vice Chairman: Director: Derek DeRossett Address: 6565 South Dayton Street, Suite 2100, Greenwood Village, Colorado 80111 **B. OFFICERS** President: Kevin D. DeRossett Address: 11116 South Towne Square, Suite 303, St. Louis, Missouri 63123 Vice President: Address: _____ Secretary: Address: ____ Treasurer: John T. Clarkson, Jr. Address: 11116 South Towne Square, Suite 303, St. Louis, Missouri 63123 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. DEREK DEROCCETT - OPERATIONS DIRECTOR (Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records

INTERTEL, INC.

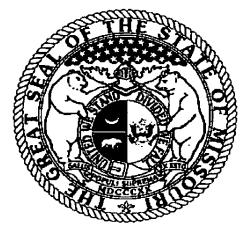
in my office and in my care and custody reveal that

was created under the laws of this State on the 3rd day of December, 1992, and is in good standing, having fully complied with all requirements of this office.

00373843

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 7th day of October, 2011

Secretary of State



Certification Number: 14231556-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp