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(Requestor's Name)			
(Address)			
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Media ONE Communications, Name of corporation - must include suffix	INC		_
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to reabove referenced foreign corporation to transact business in Florida.	in Flori egister tl	da,'' he	
Please return all correspondence concerning this matter to the following:			_
Name of Person			
Media One Communications, INC			
Firm/Company			•
312 E. NINC MILE Rd. STE 240	SEC	ਰ	
Address	圣器	55	
Address PENSACULA, FL 32514 City/State and Zip code	255		
City/State and Zip code			T
E-mail address: (to be used for future annual report notification)			
E-mail address: (to be used for future annual report notification)		- 60 -	
For further information concerning this matter, please call:	5	56	
Rubert Hill at (850) 478.6000 Name of Person Area Code Daytime Telephone Numb			
Name of Person Area Code Daytime Telephone Numb	er		
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section			
Division of Corporations Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301			
Enclosed is a check for the following amount:			
•	Filing Ficate of Sied Copy	Status	&

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 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) (State or country under the law of which it is incorporated)

3. 63-1830376

(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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.

10. 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.

11. Names and b	business addresses of officers and/or directors:	
A. DIRECTOR	as	
Chairman: 1	Obert Hill	
Address: 31	2 E. Nine Mile ld STe 290	
	NSACOLO FL 32514	
Vice Chairman:	1	
Address.		
Director:		<u></u>
Address:		F. 6
Director:		53] [
Address:		
B. OFFICERS		影 55
President:0	Sbert HIII	
	12 E NINC MILE RX STE 290	
Addless:	ASacola FL 32514	
<u> </u>		
Address:		
Secretary:	Nda & Hill	
Address: <u>54</u> 2	39 Cathy Dr MONTGOMery, AL 361	10%
Treasurer: 50	me \	
Address:		
NOTAL: If necess	sary), you may attach an addendum to the application listing additional officers and	or directors.
12. Kelert	The state of the s	
	Signature of Director or Officer	- C
	rector signing this document (and who is listed in number 11 above) affirms that the he or she is aware that false information submitted in a document to the Departmen	
a third degree feld	ony as provided for in s.817.155, F.S.	
13. <u>Kabe</u>	T KIN CY	
	(Typed or printed name and capacity of person signing application)	

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Media One Communications, Inc. was formed in Montgomery County, Alabama on May 11, 1981. The Alabama Entity Identification number for this entity is 082-462. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

TALLED

16 NAY 12 PN 3:58

SECRETAIN OF STATE
TALLAMASSEE FLORIDA



20160504000023212

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

5/4/2016

Date

X. W. Menill

John H. Merrill

Secretary of State