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COVER LETTER

_	ration Section on of Corporations		
SUBJECT:	Xtel Communications, Inc.		
SOBJECT.	Name of corporation	on - must include suffix	
Dear Sir or Ma	adam:		
"Certificate of above reference	"Application by Foreign Corporation for Existence," or "Certificate of Good Stated foreign corporation to transact busing	anding" and check are submitted ness in Florida.	iness in Florida," I to register the
Please return a	all correspondence concerning this matt	ter to the following:	
Margeaux P			
<u> </u>	Name of	of Person	
Inteserra			<u>~</u>
<u></u>	Firm/Co	ompany	122
151 Southh	all Lane, Suite 450		
	Ad	dress	F
Maitland,	FL 32751		<u> </u>
	City/State	e and Zip code	6: 22
	E-mail address: (to be use	d for future annual report notific	cation)
For further in	formation concerning this matter, pleas		
Margeaux Pennywell at (407) 659-8741 Nome of Person Area Code Daytime Telephone Number		Number	
Nam	e of Person Area C	ode Daytine Telephone	, tumbo.
Regis Divis The (2415	EET/COURIER ADDRESS: stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 shassee, FL 32303	MAILING ADDR Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	n ations
Enclosed is a Please make c	check for the following amount: heck payable to: FLORIDA DEPARTME ling Fee S78.75 Filing Fee & Certificate of Status	ENT OF STATE \$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. Xtel Communi	ications, Inc.		
(Enter name of c "Inc.," "Co.," "C	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name	ne adopted for the purpose of transacting business in Florid	
2. New Jersey		22-3356497	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
4. 07/14/1994	. 5	5.	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
6			
₇ 10000 Midla		s in Florida, if prior to registration) 1502, F.S., to determine penalty liability) e1, NJ 08054	
·		ffice street address)	
	(Current maili	ling address, if different)	
8. Name and stree	et address of Florida registered agent: (P.	.O. Box NOT acceptable)	
Name:	CORPORATE ACCESS, INC.		
Office Address:	236 East 6th Avenue		
	Tallahasee	, Florida <u>32303</u>	
	(City)	(Zip code)	

9. 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.

(Registered agent's signature)

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

□ Chairman	Name: Brian Flynn	□ Chairman	Name:				
☐ Vice Chairman	Address: 10000 Midlantic Drive	□Vice Chairman					
Director	Suite 410E	□Director					
President	Mount Laurel, NJ 08054	☐ President					
□Vice President		□Vice President					
☐ Secretary	☐Treasurer	Secretary		□Treasurer			
Other	Other	Other		□Other			
Chairman	Name: Elizabeth Sorino	□ Chairman	Name:				
□Vice Chairman	Address: 10000 Midlantic Drive	□Vice Chairman	Address:				
Director	Suite 410E	Director		·· · · · · · · · · · · · · · · · ·			
□President	Mount Laurel, NJ 08054	☐ President					
☑Vice President	<u></u>	□Vice President					
☐ Secretary	☐ Treasurer	Secretary		□Treasurer			
□Other	Other	□ Other		□Other	 -	<u>. </u>	
□ Chairman	Name: John J West	□ Chairman	Name:				
	Address: 1000 Michantic Rive	□ Vice Chairman			2022		
□Director	Site 410e	Director	Address		MAG	agrag j	
-	Mount Laurel, NJ09054	☐ President			-	1221	
□Vice President		□ Vice President			7		
☐ Secretary	∏ Treasurer	Secretary		, , , , , , , , , , , , , , , , , , ,	<u>.5</u> .		
Other	Other	·		☐ Treasurer	\sim		
		Other		□Other			
Important Notice: Usindividuals may be a	se an attachment to report more than fix 6). The and ded to the index when filing your florida Depart	ttachment will be imaged	for reporting p	ourposes only. N	on-ind	exed	
		S Control	ou toun.				
	Signature of Directo		 .				
The officer or director signing this document (and who is listed in number 11 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.							
Joh,	1 West Trousingon						

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

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

XTEL COMMUNICATIONS, INC. 0100594915

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on July 14, 1994.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ELIZABETH SORINO 401 ROUTE 73 NORTH BUILDING 10, SUITE 106 MARLTON, NJ 08053

THE CIREAT STATE OF THE LAND STATE OF THE ST

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 16th day of December, 2021

Elizabeth Maher Muoio State Treasurer

der A New

Certificate Number: 6126458071

Verify this certificate online at

https://www.l.state.nj.us/FYTR_StandingCert/JSP/Verify_Cert.jsp