



NATIONAL SERVICE INFORMATION, INC.

www.nsii.net

October 8, 2003

To Whom It May Concern:

Please file the enclosed change of agent form and return a date stamped copy to my attention. I have enclosed a self address envelope for your convenience.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is 1-800-235-0337 x 123.

Sincerely,

A handwritten signature in cursive script that reads "C. Dixon".

Carmen Dixon
Corporate Specialist

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Kentucky submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : Lightyear Communications, Inc.

2. The mailing address of the corporation : 1901 Eastpoint Pkwy , Louisville, KY 40223

3. Date of incorporation/qualification: August 11, 1993 Document number: F93000003664

4. The name and address of the current registered agent and registered office:

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
(P.O. Box NOT Acceptable)

NRAI Services, Inc.

526 E. Park Avenue

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized the board

John I Greive 9-25-03
(Signature of chairman, vice chairman, or officer) (Date)

John I Greive, Vice President of Regulatory Affairs
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 obligation of my position as registered agent.

Carmen Dixon 9-9-03
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

Carmen Dixon, Assistant Secretary

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***