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August 11, 1995

Corporate REcords bureau Division of Corporations P.O. Box 6327 Tallahassoo, FL 32314

RE: Skyboy Paging, Inc. 9507212525718

Dear Sir or Madam:

Enclosed please find:

-Application for Authority -Certificate of Good Standing \$70.00 -payment of

Please file and return all related correspondence to my attention at the address listed above.

Please feel free to contact me directly at 1-302-575-0440 with questions regarding the enclosed application. 诏 が出たしないで

Sincerely,

Jusan & Rosenthal

Susan P. Rosenthal Corporate Service Representative

enc.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 28, 1995

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THE COMPANY CORPORATION % SUSAN P. ROSENTHAL 201 N. WALNUT STREET WILMINGTON, DE 19801

SUBJECT: SKYBOY PAGING, INC. Rof. Number: W95000017324

We have received your document for SKYBOY PAGING, 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 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 (904) 487-6097.

Michael Mays Document Specialist

Letter Number: 295A00040048

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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.	Name of corporation: must include the yord "INCOMPORATED", "COMPANY", "COMPORAT abbreviations of like import in language as will elepirly indicate that it is a corporation instead or partnership if not so contained in the name at present.)	ION" or word of a natural (ls or pars	 on
2	State or country under the law of which it is incorporated) 3,(FEI number,](applicable)			-
4.	Date of Incorporation) 5. Duration: Yoar corp. will coase to exist	or "perpotual	iii	-
6.		9-1	50	
7.	na de seral De la trand	L	5 SEb - 1	עריי או
8.	(Curron Imaling address)	- L	PH 3: 0	دید . مربع : فرونه :
	(Purpose(s) of corporation authorized in home state or country to be carried out in the stat	s of Fjórida)	-01	•
9.	Name and street address of Florida registered agent:			
	- Name: Larry Wolfe			
	Office Address: 200 A John Knox Rd.			
		303-6643		_
		Zip Code)		-

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.

- see_attached (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.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICLE FOR THE SERVICE OF PROCESS WITTHN FLORIDA, NAMING AGENT UPON PROCESS MAY BE SERVED.

9-1 1 ង្អ R -71 --In compliance with Section 607.1507, Florida Statutes, the following is 1.1.2.1 submitted: PH 3: 10.01 02 First, this Skyboy Paging, Inc. desiring to organize under the laws of the state of Florida with its principal place of business located in the city of <u>Coral Springs</u>, State of

Florida, has named Larry Wolfe located at 200 - A John Knox Road, Tallahassee FL

32303-6643 as its agent for service of process within Florida.

s,

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

08/09/95

Date

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12. Name addi	es and addresses of officers and/or directors:() ress ONLY- P. O. Box NOT acceptable)	Stree	t
	CTORS (Street address only- P. O . Box NOT accept	able)	
Chairman:	MARTIN KleinmAN		
Address:	11612 Northwest 13th Manor		-
	CORNL Springs AP. 33071-5100		-
Vice Chair	man:	<u>୍</u> ୟ	-
Address: _		ET .	77
		-	
Director:		P T	- []]
		<u>ب</u> ې	(VIIII)
_		202	•
Director:			•
Address:			•
			•
B.OFFICERS	(Street address only- P. O. Box NOT acceptable)		•
President:	MATIN KEINMAN		
Address:	11612 NW 13 MANOR		
	Carn: Springs FL 33071-5100		T.
Vice Presid	lent:		
Address:			
Secretary:	MATIN KLEINMAN		
Address:	162 NW 13 MANCE		
	CORA - Springs FZ 33071-5/00		
Treasurer:			
Address:			
NOTE: If ne listing add:	cessary, you may attach an addendum to the applica it in a figure and/or directors.	tion	
13 <i>11/a</i>	tin I. (kleinman)		
(Signat	ture of Chairman, Vice Chairman, or any officer listed in num 12 of the application)	nber	
14. <u> </u> Y A	ETN L. KRINMAN - CHAIRMAN		

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

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SKYBOY PAGING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF AUGUST, A.D. 1995.



PAGE 1



Edward J. Freel, Secretary of State

AUTHENTICATION: 7604057 DATE: 08-10-95

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