F95000005084

Document Number Only

C T CORPORATION SYSTEM
Requestor's Name
660 East Jefferson Street
Address
Tallahassee, Florida 32301
City State Zip Phone
904-222-1092

400000161468A
-10/18/95--01096--001
*****70.00 *****70.00

CORPORATION(S) NAME

WMS 20642

Xtracom, Inc.
d/b/a Xtracom, Inc. of Illinois

(X) Profit
( ) NonProfit
( ) Limited Liability Company
(X) Foreign
( ) Limited Partnership
( ) Reinstatement
( ) Certified Copy
( ) Call When Ready
(●) Walk In
( ) Mail Out

( ) Amendment
( ) Dissolution/Withdrawal
( ) Annual Report
( ) Reservation
( ) Photo Copies
( ) Call if Problem
( ) Will Wait

( ) Merger
( ) Mark
( ) Other
( ) Change of R.A.
( ) Fictitious Name
( ) CUS/ G/S
( ) After 4:30
(●) Pick Up

FILED
SECRETARY OF STATE
95 OCT 18 AM 11:11

RECEIVED
95 OCT 18 AM 11:27

Name Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

3.00
10/18/95

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

CR2E031 (1-89)

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

10 today

mike May

October 18, 1995

give today Fil date

C T CORPORATION SYSTEM

FILED
95 OCT 18 AM 11:11
SECRETARY OF STATE
DIVISION OF CORPORATIONS

SUBJECT: XTRACOM, INC.
Ref. Number: W95000020842

We have received your document for XTRACOM, 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 resolution is not needed the corporate name is avaliable.

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: 795A00047080

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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. Xtracom, Inc.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

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

3. 36-3660356l
(FEI number, if applicable)

4. August 2, 1989
(Date of Incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))

7. Xtracom, Inc. 935 W Chestnut #206
Chicago, IL 60622
(Current mailing address)

8. Resale of telecommunications services.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

FILED
95 OCT 18 AM 11:14
SECRETARY OF STATE
DIVISION OF CORPORATIONS

9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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.

C T CORPORATION SYSTEM

Adrienne M. Jacklin
(Registered agent's signature) (Officer)

Adrienne M. Jacklin, Asst. Secy
(Type Name and Title of Officer)

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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

B. OFFICERS

President: Steve Shyman

Address: 1212 N LASALLE #1706

CHICAGO IL 60610

Vice President: Leon Shyman

Address: 3730 LAKE SHORE DR. #15B

CHICAGO IL 60613

Secretary: _____

Address: _____

_____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 18 AM 11:11

Treasurer: _____

Address: _____

_____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. STEVE SHYMAN PRES
(Typed or printed name and capacity of person signing application)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 18 AM 11:11

File Number 5561-747-8

STATE OF ILLINOIS

OFFICE OF THE SECRETARY OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 16 AM 11:11

To all to whom these Presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois, do hereby certify that XTRACOM, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE AUGUST 2, 1989, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS***

SEAL OF THE STATE OF ILLINOIS
AUG. 26TH 1818

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois this 16TH day of OCTOBER A.D., 19 95

George H Ryan
SECRETARY OF STATE

C-260