

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

SUBJECT:	KAM	TEL	INTERNATIONAL,	INC.		
	(Name of corporation - must include suffix)					

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Pleaso return all correspondence concerning this matter to the following:

	Rober	: t	В.	Resn	ick,	Esq.	
•		((Nam	e of Pers	on)		
_		(1	Firm/	'Compan	y)		
	3020	N.	. W .	30th	Ave	nue	
_			(Ad	dress)			
	Fort	La	sud	erdale	e, F:	lorida	33311
_	(Cit	y. S	State	and Zip	Codel		

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SECRETARY OF STATE

Should you need to call someone concerning this matter, please call:

Robert B. Pasnick	at (954)	677 _ 7771 .	
(Name of Person)		Daytime Telephone Numb)e(
	Celled toth technice	,	

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 **MAILING ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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:

ATED", "COMPANY", "CORPORATION" or words or late that it is a corporation instead of a natural sent.)
3. 95-4520085
(FEI number, if applicable)
5. perpetual
(Duration: Year corp. will cease to exist or "perpetual")
5,
S 607.1501, 607.1502, AND 817.155, F.S.)
n n n n
ng address)
ry to be carried out in the state of l agent: (P.O. Box or Mail Drop Box NOT
quire
, Florida , 33311 (Zip Code)
(Zip Code)
ept service of process for the above stated ion, I hereby accept the appointment as I further agree to comply with the provisions of formance of my duties, and I am familiar with ered agent.

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: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: KEITH V. MCDANIEL Address: 3020 NW 350 Ave of Canderdele, TC 33311 Vice Chairman:____ Address: _____ Director: Address: Director; Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: BRUCE A. CHARLES Address: 3608 SOUTHRIDGE BOULEVARD MURFREESBORO, TN 37129 Vice President: Secretary: BEVERLY J. RATH Address: 801 W. 126th CT. WESTMINISTER, CO 80234 Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. KEITH MCDANIEL, CHAIRMAN

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

State of Dolaware

Office of the Secretary of State

1, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KAM TEL INTERNATIONAL 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 TWENTY-SECOND DAY OF JULY, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KAM TEL INTERNATIONAL INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 1995.

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SECRETARY OF STATE

Edward J. Freel, Secretary of State

AUTHENTICATION:

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960212279

DATE:

07-22-96