F96000006150

TO: Qualification/Tax Lien Section Division of Corporations 900002012599--4 -11/22/96--01074--013 *****70.00 *****70.00 SUBJECT: NATIONAL (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. Please return all correspondence concerning this matter to the following: ŝ ROBERT E. رب 52 (Firm/Company) Should you need to call someone concerning this matter, please call:

ROBERT HAYMOND

(Name of Person)

(Area Code & Deytima Telephone Number)

COURIER ADDRESS:

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

MAILING ADDRESS:

Qualification/Tax Lien Section 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. ISO3. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of corporation: must include the word "INCORPOR, abbreviations of like import in language as will clearly indicaperson or partnership if not so contained in the name at pres	ATED", "COMPANY", "CORPORATION" or words or ste that it is a corporation instead of a natural
2. (State or country under the law of which it is incorporated)	3. 75-2587924 (FEI number, if applicable)
4. DEC. 30, 1994 (Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. TRANSACTIONS (Date first transacted business in Florida. (See sections	607.1501, 607.1502, AND 817.155, F.S.)
7. 400 E. CENTRE PARK	BUD STE 205 8 9
DESOTO, TX 75//3	5 N 3
(Current mailin	g address)
8. Lond Distance Telecomm. (Purpose(s) of corporation authorized in home state or country.)	VINICATION SEPURES. S. S
Florida)	, 200 min = 200 min = 20
9. Name and street address of Florida registered acceptable)	agent: (P.O. Box or Mail Drop Box NOT
Name: <u>C. T. CORPORATIO</u>	
Office Address: 1200 S. PINE ISLAN	of the state of th
PLANTATION	, Florida , <u>33324/</u> (Zip Code)
10. Registered agent's acceptance:	
Having been named as registered agent and to accept corporation at the place designated in this application registered agent and agree to act in this capacity. I all statutes relative to the proper and complete performed accept the obligations of my position as register.	on, I hereby accept the appointment as further agree to comply with the provisions of rmance of my duties, and I am familiar with

(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.

MICHAELE, JONES ASSISTANT SECRETALLY

 Names and addresses of officers and/or directors: (Street address ONL) NOT acceptable) 	r- P. O. Box
A. DIRECTORS (Street address only- P. O . Box NOT acceptable)	
Chairman:	
Address:	X 75165
Vice Chairman:	
Address:	
Director: PAGGY E. COLE	
Address: SOO OLOHAM ST	
WAXAHACHIE, TX 75165	
Director:	
Address:	·
B. OFFICERS (Street address only- P. O. Box NOT acceptable) President:	
Address: 400 E. CENTRE PARK STE 205. DESOTO, TX 75/15	SECTION INC.
Vice President:	2 S
Address:	3 396
	မှ နှင့်
Secretary: PEGGY E. COLE	<u> </u>
Address: HOO E CENTRE DARK STE 205	
DESOTO, TX 75115	
Treasurer: PENCY E. COLE	
Address: WOO E CENTRE PARK STE 205 DESOTO	7 x 75115
NOTE: If necessary, you may attach an addendum to the application listing ad officers and/or directors.	ditional
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the appl	ication)
14. TUAN COLE PRESIDENT (Typed or printed name and capacity of person signing application)	



I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes; and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, NATIONAL FIBERCOM, INC. as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 30, 1994 and is in good standing in this state.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on September 26, 1996.

Secretary of State

Certification Clerk