

Document Number Only

F 97000006300

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

600002358906--6

-12/01/97-01064-015

*****70.00 *****70.00

(Coleman Enterprises, Inc.)

cross up:

Local Long Distance, Inc.

☒ Profit

☐ NonProfit

☐ Limited Liability Co.

☒ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Certified Copy

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Amendment

☐ Dissolution/Withdrawal

☐ Annual Report

☐ Reservation

☐ Photo Copies

☐ Call if Problem

☐ Merger

☐ Mark

☐ Other UCC Filing

☐ Change of R.A.

☐ Fic. Name

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W.P. Verifier

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DEC-1 PM 12:37
DIVISION OF CORPORATION

CR2E031 (1-89)

RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned Daniel G. Coleman do hereby certify that this Resolution of the Board of Directors of Coleman Enterprises, Inc., a corporation duly organized and existing under the laws of the State of Minnesota, was duly adopted on 10-1-96.

Resolved, that Coleman Enterprises, Inc. organized and existing in the state of Minnesota, hereby adopts the name Local Long Distance, Inc. for use in Florida.

Dated 9-5-97


Name and Title

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. Coleman Enterprises, 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. Minnesota

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

3. 41-1824960

(FEI number, if applicable)

4. 12/11/95

(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. 28 West Fifth Street, Suite 480

St. Paul, mn 55102

(Current mailing address)

8. Resale of long distance telecommunications service

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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 obligation of my position as registered agent.

C T Corporation System

Luan H Wanner

(Registered agent's signature) (Officer)

Susan J Wanner 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: Dan Coleman

Address: 28 West Fifth Street, Suite 480
St. Paul, mn 55102

Vice Chairman: _____

Address: _____

Director: Dan Coleman

Address: 28 West Fifth Street, Suite 480
St. Paul, mn 55102

Director: _____

Address: _____

B. OFFICERS

^{CEO}
President: Dan Coleman

Address: 28 West Fifth Street, Suite 480
St. Paul, mn 55102

^{CFO}
~~Vice President~~: Dennis Coleman

Address: 28 West Fifth Street, Suite 480
St. Paul, mn 55102


Secretary: Dan Coleman

Address: 28 West Fifth Street, Suite 480
St. Paul, mn 55102

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. Daniel G. Coleman CEO _____
(Typed or printed name and capacity of person signing application)

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

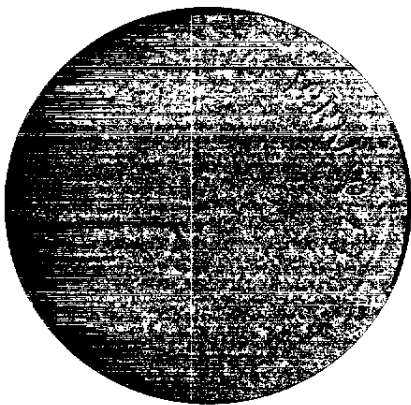
I, Joan Anderson Grove, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Coleman Enterprises, Inc.

Date Formed: 12/11/1995

Chapter Governed By: 302A

This certificate has been issued on 11/26/97.



Joan Anderson Grove
Secretary of State.