FOUNDATION OF THE PROPERTY OF

CT Corporation System			
Requestor's Name 660 East J efferson St	reet		
Address Tallahassee, FL 32310	222-1092		
City State Zip	Phone		
CORPORAT	ON(S) NAME	1000025942110 -07/21/9801072019 ******70.00 ******70.00	
Aaclaim Hosp	Halthy Comun	unications, Inc.	
() Profit () NonProfit	() Amendmer	t () Merger	210 90 JU 2
() Foreign	() Dissolution	Withdrawal () Limite	d Liability Company
() Limited Partnership () Reinstatement ()Fictitious_Name	()Annual Rep ()Name Regis ()UCC-1 Fina	ration () Chang cing Statement() UCC-3	e of _a B.A.
() Certified Copy	() Photo Cop	es () CUS	
() Call When Ready ﴿ Walk In () Mail Out	() Will Wait	em () After 4: () Pick U₁	

Please Return Extra Copies

Thank You!!

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W.P. Verifier

7/21

CR2E031 (1-89)

Acknowledgment

Name Availability

Document Examiner

Updater Verifier

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.	Acclaim Hospitality Communications, 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.	Illinois (State or country under the law of which it is incorporated) 3. 36-4231666 (FEI number, if applicable)
4.	June 9, 1998 (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6.	Upon Oualification (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))
7.	330 South Wells Street, 10th Floor, Chicago, Illinois 60606
	(Current mailing address)
ο.	To sell long distance communications services to the hotel industry. (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
	Plantation , Florida, 33324 (Zip Code)
Hi de fu	D. Registered agent acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I orther 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.
	(Registered agent's signature)
	Jeffrey R. Graves, Asst. Secretary

(Type Name and Title of Officer)

(FL - 2189 - 11/16/94)

- 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:

(Chairman: _	Daniel T. Carroll		
A	Address: _	330 South Wells Street, 10th Floor		
	_	Chicago, Illinois 60606		
,	√ice Chairm	irman: Andrew Jahelka hor		
,	Address:	330 South Wells Street, 10th Floor		
		Chicago, Illinois 60606		
[Director:			
ı	Director:			
,	Address:			
B. OFFICI	ERS			
1	President: _D	aniel T. Carroll		
	Address: _3	30 South Wells Street, 10th Floor		
		hicago, Illinois 60606		
,	Vice Presid	ent:		
	Address:			
	_			
	Secretary: ₂	ndrew Jahelka		
		30 South Wells Street, 10th Floor		
		Chicago, Illinois 60606		

Treasurer: Andrew Jahelka
Address: 330 South Wells Street, 10th Floor
Chicago, Illinois 60606
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 T. Carroll, President (Typed or printed name and capacity of person signing application)

BECRETARY BY STATE OF STATE OF

File Number 5998-869-7



To all to whom these presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,





my hand and cause to be affixed the Great Seal of the State of Illinois this _________7TH

day of _______ A.D., 19_98

George H Ryan
SECRETARY OF STATE