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Other

City/State/Zip

Phone #

100002774661--8 -02/15/99--01017--001 *****75.00 ******75.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1			-	
	rporation Name)	(Document #)		
2(Co	rporation Name)	(Document #)		
3.	rporation Name)	(Document #)		
4(Con	rporation Name)	(Document #)		
☐ Walk in	Pick up time	Certified Co	ору	
☐ Mail out	☐ Will wait ☐ Pho	otocopy Certificate	of Status	
NEW FILINGS:	AMENDMENTS			
Profit	Amendment		77-10	
NonProfit	Resignation of R.A., O	fficer/Director	SECT.	_
Limited Liability	Change of Registered A	Agent	99 FEB 12 SECRETARY FALLAHASSI	
Domestication	Dissolution/Withdrawa	al		
Other	Merger		B 12 AM 9: 33 TARY OF STATE ASSEE, FLORID	7
	A447		OT 3: ORAC 3:	
OTHER FILINGS Annual Report	REGISTRATIO		DF W	
Fictitious Name	Foreign			
Name Reservation	Limited Partnership			
T. MALES T. COOK, A CHILDIE	Reinstatement		_	
	Trademark		<u></u>	

Examiner's Initials - 47/5/99

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:

	PointeCom, Inc Name of corporation: must in abbreviations of like import in or partnership if not so conta	i language as will clearly	indicate t	OT, COMPAN that it is a con	Y','CORPOF poration inst	RATION* or wor ead of a natura	ds or I person
-	Delaware State or country under the la	_					
4.	June 9, 1998 (Date of incorporation)	5	perr	petual	:II		
	•					rist or bethem	iai j
6.	The Company has (Date first transacted busines	not transacted	busine	ess in r	TOT TOT		
	-	•	-			= 500	o
7.	28 W. Flagler St	reet, Suite 900) .				<u> </u>
	Miami, Florida 3	3130				- 22	
	(Current mailing address)			A55	N F
						H _C	3
8.	The provision of (Purpose(s) of corporation	of telecommunica	etions	Service	ed out in the	state of Elorid	
	/: -: p-000/0/ -: -00: p-0: -00:						
	•		B 01 C0011	ity w bo can		元之	ယ်
9.	Name and street add					RIGA	က
9.			gistered	agent:		元之	က
9.	. Name:	iress of Florida reg	jistered	agent:		元之	က
9.	. Name:	NRAI Services, 526 E. Park Ave	Inc.	agent:	'- ·	ANDA	33
9.	. Name:	iress of Florida reg	Inc.	agent:	'- ·	ANDA	<u>ယ</u>
	. Name:	NRAI Services, 526 E. Park Ave Tallahassee	Inc.	agent:	'- ·	32301	<u>ယ</u>
10 Hi co re	Name: Office Address: Office A	NRAI Services, 526 E. Park Ave Tallahassee acceptance: egistered agent and designated in this capa the proper and com	Inc. enue to acce, applicat acity. I fe plete pe n as reg	pt service tion, I here urther agre rformance istered age	 , Florida , of process by accept e to compl of my dut	32301 (Zip Code for the above the appoint by with the p	ve stated tment as

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:

	_	_			
Δ	131		\boldsymbol{r}	OF	

Address:		
, Edious.		_
Direc Vice Chai n	tor Mark Patrick Delaney	
•	Miami, FL 33130	
Director: _	Stephen Raville	
Address: _		<u></u>
	Miami, FL 33130	-
Director: _	Gary Morgan	<u>_</u>
Address: _	28 W. Flagler St., Suite 900	-
-	Miami, FL 33130	
OFFICERS		99 SEI TALLI
President	Gary Morgan	CRE EB
Address: _	28 W. Flagler St., Suite 900	TARY OF S
_	Miami, FL 33130	E FLO
	•	9: 33 STATE LORID
		epri ω A
, Saaratan u	Trevor Prichett	
•		
Address:	Miami, FL 33130	
Treasurer	Rick Halevy	
Address:	28 W. Flagler St., Suite 900	_
	Miami, FL 33130	
	Address: _ Director: _ Address: _ Director: _ Address: _ Address: _ OFFICERS President: Address: _ Vice President: Address: _ Treasurer: Address:	Director: Stephen Raville Address: 28 W. Flagler St., Suite 900 Miami, FL 33130 Director: Gary Morgan Address: 28 W. Flagler St., Suite 900 Miami, FL 33130 DFFICERS President: Gary Morgan Address: 28 W. Flagler St., Suite 900 Miami, FL 33130 Vice President: Address: Trevor Prichett Address: 28 W. Flagler St., Suite 900 Miami, FL 33130 Treasurer: Rick Halevy Address: 28 W. Flagler St., Suite 900

Vice Chairman, or any officer listed in number 12 of the application)

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

State of Delaware Office of the Secretary of State

PAGE :

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POINTECOM, INCORPORATED" 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 FIRST DAY OF FEBRUARY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID POINTECOM, INCORPORATED ON THE NINTH DAY OF JUNE, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
99 FEB 12 AM 9: 33
SECRETARY OF STATE



Edward J. Freel, Secretary of State

2905648 8300

AUTHENTICATION:

9551869

991040145

DATE:

02-01-99