

Document Number Only

F990000003522

CT Corporation System

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092
City State Zip Phone

300002923303--5
-07/06/99--01035--019
*****70.00 *****70.00

CORPORATION(S) NAME

W99-15514

Fiberworks, Inc

☒ Profit
☐ NonProfit

☐ Amendment

☐ Merger

☒ Foreign
☐ LLC

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership
☐ Reinstatement

☐ Annual Report
☐ Reservation

☐ Other UCC Filing
☐ Change of R.A.

☐ Certified Copy

☐ Photo Copies

☐ CUS

☐ Call When Ready

☐ Call if Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

| |
|-------------------|
| Name |
| Availability |
| Document Examiner |
| Updater |
| Verifier |
| Acknowledgment |
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Please Return Extra Copies
File Stamped To:

Jeffrey Butterfield



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 6, 1999

CT CORPORATION SYSTEM
ATTN: JEFFREY BUTTERFIELD

SUBJECT: HORSEPOWER COMMUNICATIONS, INC.
Ref. Number: W99000015514

We have received your document for HORSEPOWER COMMUNICATIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please list the street address of each officer/director.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 399A00035066

ATTN: Lee Rivers

please back date!

THANKS

RECEIVED
CORPORATIONS
TALLAHASSEE, FLORIDA
JUL 14 1999

99 JUL -7 AM 11:16

RECEIVED



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 7, 1999

CT CORPORATION SYSTEM
ATTN: JEFFREY BUTTERFIELD

SUBJECT: HORSEPOWER COMMUNICATIONS, INC.
Ref. Number: W99000015514

*WALK-IN
PICK-UP*

We have received your document for HORSEPOWER COMMUNICATIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Thank you for correcting your application. Because you must still provide the street address for your officers and directors, we are returning just the attachment with their names, along with a copy of our previous letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 199A00035202

ATTN: LEE RIVERS

*PLEASE BACK-UP
THANK YOU!*

RECEIVED

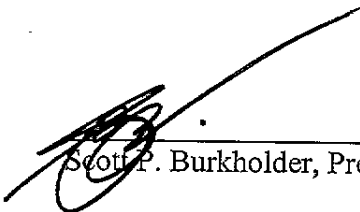
99 JUL -8 PM 3:29

**OFFICER'S CERTIFICATE
OF
FIBERWORKS, INC.**

I, Scott P. Burkholder, the duly elected and authorized President of the FiberWorks, Inc., a corporation duly organized and existing under the laws of the State of Georgia (the "Corporation"), do hereby certify that the following Resolution of the Board of Directors of the Corporation was duly adopted as of May 6, 1999:

"RESOLVED, that the Corporation shall be authorized to utilize and hereby adopts the name Horsepower Communications, Inc. for use in the states of Florida and Texas."

Dated as of May 6, 1999



Scott P. Burkholder, President

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99 JUL -6 PM 3:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**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. The Fiber Works, 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. Georgia 3. Applied For
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1-7-94 5. Perpetual
(Date of incorporation) (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 817.155, F.S.)
7. 585 Old Norcross Rd., Ste. F., Lawrenceville, GA 30245

(Current mailing address)

8. Computer network integration and value-added distribution.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Rd.

Plantation, Florida, 33324

(Zip code)

10. Registered agent's 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 obligations of my position as registered agent.

Mary R. Adams
(Registered agent's signature)

MARY R. ADAMS
ASSISTANT SECRETARY

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)

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STATE
SECRETARY
TALLAHASSEE FLORIDA

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: see attached officers/directors rider

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: see attached officers/directors rider

Address: _____

Vice President: _____

Address: _____

Secretary: _____

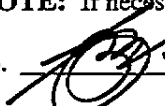
Address: _____

Treasurer: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE - FLORIDA

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. Scott P. Burkholder, President
(Typed or printed name and capacity of person signing application)

FiberWorks, Inc.
Officers & Directors List

Scott P. Burkholder
805 Marathon Parkway
Suite 160
Lawrenceville, GA 30045

President/Director

Michael L. Massari
805 Marathon Parkway
Suite 160
Lawrenceville, GA 30045

Vice President/Secretary/Treasurer/Director

Ed Croft
805 Marathon Parkway
Suite 160
Lawrenceville, GA 30045

Director

Joseph Mathias
805 Marathon Parkway
Suite 160
Lawrenceville, GA 30045

Director

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : K91810926
CONTROL NUMBER : K402827
DATE INC/AUTH/FILED: 01/07/1994
JURISDICTION : GEORGIA
PRINT DATE : 06/30/1999
FORM NUMBER : 211

C T CORPORATION SYSTEM
NICHOLEE JOHNSON
1201 PEACHTREE ST NE STE 1240
ATLANTA, GA 30361

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

THE FIBER WORKS, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox

Cathy Cox
Secretary of State

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SECRETARY OF STATE
TALLAHASSEE FLORIDA