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Division of Corporations	_		
	ess PARTNELS,	LLC	
	ion - must include suffix)		
LL	C		
Dear Sir or Madam:			
The enclosed "Application by Foreign Germantion for "Certificate of Existence", and check are submitted to transact business in Florida.	o register the above referenced for	eign corporation	
Please return all correspondence concerning this matter. ALSALA Nelson	ter to the following: 6.101	0047140159 -12/07/0101030008 ******78.75 *****78.75	
(Name	of Person)	WOI-28179	
	gratuers, LLC		
(Firm/C	Company)		
2100 Jouth BUDGE	PARKUSAY - Ju	ite 650	
_ ^ 1 (^	idress)		
	SAMA 352	07	
(City/Stat	te and Zip code)		
For further information concerning this matter, pleas	se call:	0047140159 01/02/0201018006 *****46.25 *****46.25	
Same at About at (205) 414-7555 (Name of Person) at (205) 414-7555 (Area Code & Daytime Telephone Number)			
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	FILED 02 JAN -3 PH 9: SECRETARY GESTAL TALLAHASSEE, FLORE	
\$78.75 Filing Fee & Certificate of Status	Certified Copy (87.50 Filing Fee; Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 11, 2001

BARBARA N. POTTS 2100 SOUTHBRIDGE PKWY, STE 650 BIRMINGHAM, AL 35209

SUBJECT: VIRTUAL ACCESS PARTNERS, LLC

Ref. Number: W01000028179

We have received your document for VIRTUAL ACCESS PARTNERS, LLC and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$46.25. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6097.

Michael Mays Document Specialist

Letter Number: 401A00065088

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Overne Access PANTNERS, CCC
(Name of foreign limited liability company)
2. Je Jow Arc. (Jurisdiction under the law of which foreign limited liability) 3. (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 3-205/ 5. (Date of Organization) (Duration: Year limited liability company will cease to
exist of perpetual)
6. 8/27/2051 8878/S (IS/Lee) LESCOL OFFICE (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7. 2100 Southburble Pontes by - Suite 650
1. Live Juniparania (Bigweg - Suit C 630
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
TALL
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Software
Devel-Priest Profescional Services.
Parkoun ()elsa otto
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
BARBANA Nelson Potts
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Unaud Access PANTNEN, LCC	
2. The name and the Florida street address of the registered agent and office are:	
CHANLES S. MICHAEC	
7892 MUD (Ale Rob) Florida street address (P.O. Box NOT ACCEPTABLE)	
MacCleNNY FL 32063 City/State/Zip Zig &	
Having been named as registered agent and to accept service of process for the above stated limited	1
liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.	ો પો
January ((Signature)	

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

30.00

5.00

State of Delaware Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VIRTUAL ACCESS PARTNERS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF DECEMBER, A.D. 2001.

02 JAN -3 PH 9: 57
SECRETARY OF STATE



Warriet Smith Windson, Secretary of State

3422323 8300

010604796

AUTHENTICATION: 1480146

DATE: 12-04-01