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	Office Use Only
CORPORATION NAME(S)	DOCUMENT NUMBER(S), (if known):
1. Bellooth (Corporation Name)	Dersonal Commonications (Document #)
2(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #) 90004772189—0 -01/14/0201012015
4. (Corporation Name) Walk in Pick up	####155.00 *****155.00
Mail out Will w	
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Amendment Resignation of R.A., Officer/Director
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other Control of the Control of
CR2E031(7/97)	SE OLW 11 NV Esaminer's Initials DECEINED

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.	BELLSOUTH PERSONAL COMMUNICATIONS, LLC (Name of foreign limited liability company)	:	*
	(Name of foleigh mined habitly company)		
2	DELAWARE 3. 58-2067615		
۲. (Jurisdiction under the law of which foreign limited liability company is organized) 3. 58-2067615 (FEI number, if applicable)		= "- •
4.	09/30/00 5. PERPETUAL (Dute of Organization) (Duration: Year limited liability company will cease to	<u></u>	
	(Date of Organization) (Duration: Year limited hability company will cease to exist or "perpetual")		-
6.	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)		
7.	5565 GLENRIDGE CONNECTOR, ATTN: ELIZABETH MUSSELL, SUITE 1700		
	ATLANTA, GA 30342	. ::	
	(Street address of principal office)		
8.	If limited liability company is a manager-managed company, check here		. <u>.</u>
9.	The name and usual business addresses of the managing members or managers are as follows:		
	SOLE MEMBER:		
	CINGULAR WIRELESS LLC, 5565 GLENRIDGE CONNECTOR, SUITE 1700		`'
	ATLANTA, GA 30342		
		_	
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rec	cordsin	1
	the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language		
	translation of the certificate under oath of the translator must be submitted.)	2	¥ 7
11	. Nature of business or purposes to be conducted or promoted in Florida: ANY AND ALL LAWFUL		
	BUSINESS, SPECIFICALLY TELECOMYONICATIONS SERVICES	==	
	la luste sin		_
	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.)		
	ELIZABETH A. MUSSELL, ASSISTANT SECRETARY	* *	
	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 L	imited Liability Cor	npany is:				
BELLSOUTH PERSONAL	COMMUNICATIONS, LE	ic				
2. The name and the	Florida street addres	ss of the register	ed agent and office	are:		
Corporation Service Company						
(Name)						
Florida street address (P.O. Box NOT ACCEPTABLE)						
	Tallahassee	FL	32301	*.: ±_		
		(City/State/Zip)				

Having been named as registered agent and to accept service of process for the above stated limited 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 all 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.

Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered

5 25.00 Designation of Registered Agent 5 30.00 Certified Copy (optional) 5 5.00 Certificate of Status (optional) OZ JAN I 4 AMII: 14 SECRLIARY UF STATE ALI AHASSEF EI ASIA.

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BELLSOUTH PERSONAL COMMUNICATIONS, 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 NINTH DAY OF JANUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

OZ JAN 14 AMII: 14



Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1547999

DATE: 01-09-02

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