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June 26, 1998

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Alvin A. London
1917-1998

Secretary of State
State of Florida
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

500002582655-- 8
-07/08/98--01030--003
****285.00 ****285.00

RE: Application for Authority

Dear Administrators:

Enclosed please find duplicate originals of Application for Authority on behalf of MultiNet Services, LLC, along with Certificate of Existence issued by the North Carolina Secretary of State.

Please provide us with letter of acknowledgement upon registration. Also enclosed is our client's check in the amount of \$285.00 representing the required filing fees.

If there is anything further, please do not hesitate to call.

Very truly yours,

Annie H. Martin, Paralegal
For the Firm

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name	7/9/98
Availability	dec
Document Examiner	AHM:slf
Updater	Encls.
Updater Verifier	C
Acknowledgement	DCC
W. P. Verifier	DCC

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. MultiNet Services, LLC
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)
2. North Carolina
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 56-2079292
(FEI number, if applicable)
4. April 7, 1998
(Date of Organization)
5. Dec 2099
(Duration: Year limited liability company will cease to exist or "perpetual")
6. upon authority being granted
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 1200 South Pine Island Road
Plantation, Florida 33324
(Street address of principal office)
8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
<u>W. Robert Dunlap, Jr.</u>	<u>MGR</u>	_____	_____
<u>4421 Stuart Andrew Blvd. #204</u>		_____	
<u>Charlotte, NC 28217</u>		_____	
<u>Clark Westneat</u>	<u>MGR</u>	_____	
<u>4421 Stuart Andrew Blvd. #204</u>		_____	
<u>Charlotte, NC 28217</u>		_____	
<u>Joe Yochem</u>	<u>MGR</u>	_____	
<u>4421 Stuart Andrew Blvd. #204</u>		_____	
<u>Charlotte, NC 28217</u>		_____	
<u>William W. Neal, III</u>	<u>MGR</u>	_____	
<u>4421 Stuart Andrew Blvd., #204</u>		_____	
<u>Charlotte, NC 28217</u>		_____	
<u>Pamela K. Clement</u>	<u>MGR</u>	_____	
<u>4421 Stuart Andrew Blvd., #204</u>		_____	
<u>Charlotte, NC 28217</u>		_____	

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state 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.)

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Description of Property

The description of Property contributed is as follows:

Accounts Receivable, Networking Equipment, goodwill, and non-compete agreements

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TALLAHASSEE, FLORIDA

**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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: MultiNet Services, LLC

2. The name and address of the registered agent and office is:

C T CORPORATION SYSTEM
(Name)

c/o C.T. CORPORATION, 1200 South Pine Island Road,
(P.O. Box not acceptable)

Plantation, Florida 33324
(City/State/Zip)

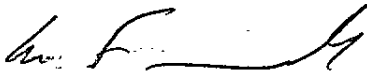
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

C T CORPORATION SYSTEM



(Signature)

July 6, 1998

(Date)

**ALLAN FARNELL
ASSISTANT SECRETARY**

FILING FEE: \$ 35 for Designation of Registered Agent

STATE OF NORTH CAROLINA



Department of The
Secretary of State

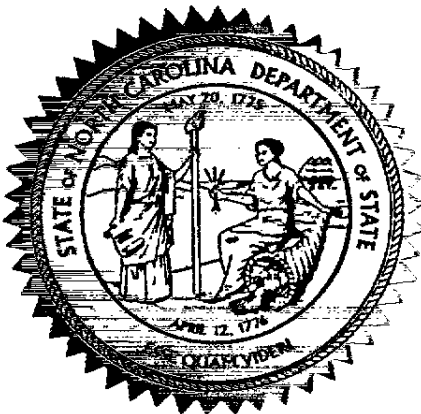
CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, **ELAINE F. MARSHALL**, *Secretary of State of the State of North Carolina*, do hereby certify that

MULTINET SERVICES, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the day of April, 1998, with a period of duration ending DEC 2099.

I **FURTHER** certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 17th day of June, 1998.

Elaine F. Marshall

Secretary of State

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TALLAHASSEE, FLORIDA