00293TRANSMITTAL LETTER 2000 Department of State Division of Corporations P. O. Box 6327 JAN ц. Tallahassee, FL 32314 , Tì h.N ----£ SUBJECT: MID FLORIDA CELLULAR COR RATION (Proposed corporate name - must include suffix) 700003088157--0 -01/04/00--01089--016 \*\*\*\*131.25 \*\*\*\*\*87.50 Enclosed is an original and one (1) copy of the articles of incorporation and a check for: 🗙 \$131.25 \$70.00 \$78.75 \$122.50 Filing Fee, Certified Copy Filing Fee **Filing Fee** Filing Fee & Certificate & Certified Copy & Certificate Additional Copy Required TOHN W. CONNELLY, FROM: Name (printed or typed) 279 SUNKISE POINT Address LAKE MARY, P City, State & Zip ろブフダん ロフーションノーレマンシチ 904-527-356 Daytime Telephone number

NOTE: Please provide the original and <u>one copy</u> of the articles.

A. Howell JAN 1 1 2000

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-		2000 JAN -4 MM 7: 43	
、	ARTICLES OF INCORPORATION	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
	OF		
	MID FLORIDA CELLULAR CORPORM	TION	·
	ARTICLE I NAME		· ·
	The name of the corporation shall be: <u>MID FLORIDA</u> CELLULAR CORPORATION.		
	ARTICLE II PRINCIPAL OFFICE	· · · ·	
	The principal place of business and mailing address of this corporation shall be:		
	MID FLORIDA CELLULAR CORPORATION	· · · ·	
	2231 S. WOODLAND BLVD.		· · _ · _ ·
	DELAND, FL. 32770		- 
	ARTICLE III CAPITAL STOCK	· · · · · · · ·	· · · · ····
	The number of shares of stock that this corporation is auth any one time is: <u>[000-[00E THOUSANA]</u>	orized to have outstanding at	·
	ARTICLE IV INITIAL REGISTERED AGENT AND AI	DDRESS	
	The name and address of the initial registered agent is:		
	TOHN W. CONNELLY, JR.	-	· · · · ·
	279 SUMPRISE POINT		
	LAKE MARY FL. 30746	•	
	ARTICLE V INCORPORATOR		
	The name and street address of the incorporator to these A	rtiales of Incomposition is:	

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JOHN W. COMMELLY JA. 279 SUNRISE POINT LAKE MARY FL. 32746 \_\_\_\_\_ · - -· -الالميجست الاردوار ومنتقارة المتحدث الإراري \_ \_\_\_\_ + = = = . ...

The undersigned has executed these Articles of Incorporation this 3RD day of  $\sqrt{RMAR}$  200.

,Incorporator

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE CRETARY OF STATE TAILAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

MID FLORIDA CELLULAR CORPORATION

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

TOHN W. CONNELLY JR. (NAME)

P.O. Box or Mail Drop Box NOT ACCEPTABLE)

LAKE MARY FL - 32746 (CTTY/STATE/ZIP)

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

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314