

PO1000002627

December 28, 2000

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Top Line Fiber Splicing, Inc.

300003518253--1
-01/02/01--01065--022
*****70.00 *****70.00

Gentlemen:

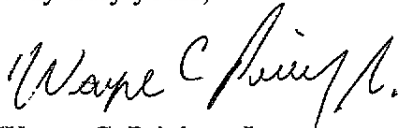
Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$70.00

This represents the cost of the Filing Fees and Fee for Registered Agent Designation for the above named corporation. The mailing address of the corporation is:

321 Anthony Drive
Port Orange, FL 32127
(904) 322-1361

Please make the effective date of the Corporation January 1, 2001.

Very truly yours,


Wayne C. Prinkey, Jr.

EFFECTIVE DATE
01-01-2001

FILED
01 JAN -2 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

of

TOP LINE FIBER SPLICING, INC.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

TOP LINE FIBER SPLICING, INC.

EFFECTIVE DATE
01-01-2001

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 100 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS	321 Anthony Drive		
CITY	Port Orange	FLORIDA	ZIP 32127
Mailing address, if different			
STREET ADDRESS	Same		
CITY	Port Orange	FLORIDA	ZIP 32127

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	Wayne C. Prinkey, Jr.		
ADDRESS	321 Anthony Drive		
CITY	Port Orange	FLORIDA	ZIP 32127

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	Wayne C. Prinkey, Jr.		
ADDRESS	321 Anthony Drive		
CITY	Port Orange	STATE	Florida ZIP 32127
NAME	Carly Prinkey		
ADDRESS	321 Anthony Drive		
CITY	Port Orange	STATE	Florida ZIP 32127
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Wayne C. Prinkey, Jr.		
ADDRESS	321 Anthony Drive		
CITY	Port Orange	STATE	Florida ZIP 32127
NAME	Carly Prinkey		
ADDRESS	321 Anthony Drive		
CITY	Port Orange	STATE	Florida ZIP 32127
NAME			
ADDRESS			
CITY		STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 30th day of December, ~~XX~~2000.

Wayne C. Prinkey, Jr. (Signature)

Carly F. Prinkey (Signature)

____ (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

TOP LINE FIBER SPLICING, INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 321 Anthony Drive
Port Orange, FL 32127

has named Wayne C. Prinkey, Jr.

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

Wayne C. Prinkey, Jr.
(Signature)

12/30/00
(Date)

FILED
01 JAN -2 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA