

76000011786

Sunstate Research Assoc  
Requestor's Name

PO Box 11271  
Address

Tallahassee FL 32302  
City/State/Zip Phone #

600001709156  
-02/07/96--01034--010  
\*\*\*\*122.50 \*\*\*\*122.50

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Southeast Phonecard, Inc.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time \_\_\_\_\_

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED  
96 FEB -7 AM 11:13  
DIVISION OF CORPORATION SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED  
96 FEB -7 PM 12:34

## TRANSMITTAL LETTER

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

SUBJECT: SOUTHEAST PHONECARD, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: MR. KARL H. MUEHLBERGER  
Name (printed or typed)

1149 LAKE POINT DRIVE  
Address

LAKELAND, FLORIDA 33813  
City, State & Zip

(813) 644-0744  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION  
OF  
SOUTHEAST PHONECARD, INC.**

**FILED**  
96 FEB -7 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

**ARTICLE I  
NAME**

The name of the corporation shall be: **SOUTHEAST PHONECARD, INC.**

**ARTICLE II  
PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

**SOUTHEAST PHONECARD, INC.  
1149 Lake Point Drive  
Lakeland, Florida 33813**

**ARTICLE III  
AUTHORIZED SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Hundred Thousand (100,000) shares of Common Stock with a par value of One-Tenth of One Cent (\$.001) per share.

**ARTICLE IV  
INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

**Mr. Karl H. Muehlberger  
1149 Lake Point Drive  
Lakeland, Florida, 33813**

**ARTICLE V  
INCORPORATOR(S)**

The name and street address of the incorporator to these Articles of Incorporation is:

Mr. Karl H. Muehlberger  
1149 Lake Point Drive  
Lakeland, Florida 33813

The undersigned incorporator has executed these Articles of Incorporation this 6 day of FEBRUARY, 1996.

  
\_\_\_\_\_  
Karl H. Muehlberger  
Incorporator

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: SOUTHEAST PHONECARD, INC.

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

KARL H. MUEHLBERGER  
(Name)

1149 LAKE POINT DRIVE  
(P.O. Box not acceptable)

LAKELAND, FLORIDA 33813  
(City/State/Zip)

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96 FEB -7 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*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.*

  
(Signature)

FEBRUARY 6, 1996  
(Date)