P9900001342

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

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SUBJECT:	LOCALTEL (Proposed corpor	Company rate name - must înclude suffi	x)	<u> </u>	
Enclosed is an origin \$70.00 Filing Fee	al and one(1) copy of the article \$78.75 Filing Fee & Certificate of Status	s of incorporation and a substitution and a substit	\$87.50 Filing Fee, Certified Coy & Certificate Status	of	
FROM	: ALISA A. MIT	TCH ELC rinted or typed)			· · · · · · · · · · · · · · · · · · ·
	2127 S.E. 1	FORT KING ST. Address		(* · · · ·	
	OCALA, FZ. City, 352-867-76 Daytime T	3447 / State & Zip 664 Celephone number		99 MAR -4 DIV _{N-J} CAR TALLARISASS	Territory Landscape
			<u>.</u>		

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

08/2/8

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purposes 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:

LocalTel Company

ARTICLE II PRINCIPAL OFFICE

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

2127 S.E. Fort King Street Ocala, Florida 34471

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Alisa A. Mitchell 2127 S.E. Fort King St. Ocala, Florida 34471

ARTICLE V INCORPORATOR

The name and address of the incorporator to these articles of incorporation are:

Alisa A. Mitchell 2127 S.E. Fort King St. Ocala, Florida 34471

Signature / Incorporator

Date

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 / Registered Agent

Date

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99 HAR -4 PH 2: 37

ON LIGHTASSEE FLORIDA