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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

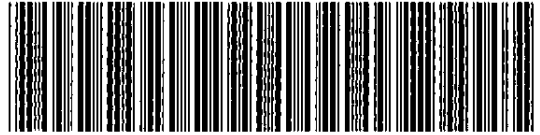
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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4-20-09
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llc

EDGEGE O. GEORGE
ROBERT P. SCHEB
JAMES E. TOALE
DAVID G. BOWMAN, JR.

Of Counsel

DAVID G. BOWMAN
MICHAEL D. HORLICK, P.A.



JOHN F. BURKET
1875-1947
JOHN F. BURKET, JR.
1915-1984
V. MORRIS SMITH
1921-1996
JAMES J. DRYMON
1926-2000
I.W. WHITESELL, JR.
Retired

April 15, 2009

Florida Department of State
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Metropolitan Area Networks, Inc.

Dear Sir/Madam:

In connection with the above referenced corporation, I enclose the following:

1. Application by Foreign Corporation for Authorization to Transact Business in Florida.
2. Original certificate of existence from the State of Delaware.
3. Our firm check #24744, made payable to Florida Department of State in the amount of \$70.00 and representing the registration fee.
4. Cover letter.

Thank you for your assistance in this regard.

Very truly yours,

Elsie M. McDonald
Legal Assistant to David G. Bowman, Jr.

Enclosures

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: METROPOLITAN AREA NETWORKS, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DAVID G. BOWMAN, JR.

(Name of Person)

BOWMAN, GEORGE, SCHEB & TOALE, P.A.

(Firm/Company)

27 50 RINGLING BOULEVARD, SUITE 3

(Address)

SARASOTA, FLORIDA 34237

(City/State and Zip code)

For further information concerning this matter, please call:

DAVID G. BOWMAN, JR.

(Name of Person)

at (941) 366-5510

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. METROPOLITAN AREA NETWORKS, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)

4. JULY 7, 1999 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 923 INCLINE WAY, #36, INCLINE VILLAGE, NV 89451 (Principal office address)

774 MAYS BLVD., #10-465, INCLINE VILLAGE, NV 89451 (Current mailing address)

8. WIRELESS COMMUNICATIONS PROVIDER (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: DAVID G. BOWMAN, JR.

Office Address: 2750 RINGLING BLVD., #3

SARASOTA, Florida 34237 (City) (Zip code)

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10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

David Bowman Jr. (Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Name's and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: WILLIAM J. CHASTAIN
Address: 774 MAYS BLVD., #10-465
INCLINE VILLAGE, NV 89451

Vice Chairman: _____
Address: _____

Director: ANDREW BUTLER
Address: 774 MAYS BLVD., #10-465
INCLINE VILLAGE, NV 89451

Director: ROMNEY P. VINSON
Address: 774 MAYS BLVD., #10-465
INCLINE VILLAGE, NV 89451

B. OFFICERS

President: WILLIAM J. CHASTAIN
Address: 774 MAYS BLVD., #10-465
INCLINE VILLAGE, NV 89451

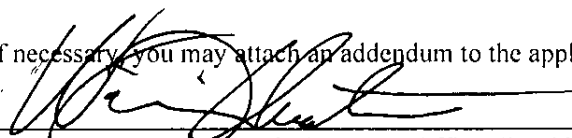
Vice President: ROMNEY P. VINSON
Address: 774 MAYS BLVD., #10-465
INCLINE VILLAGE, NV 89451

Secretary: ROMNEY P. VINSON
Address: 774 MAYS BLVD., #10-465

Treasurer: INCLINE VILLAGE, NV 89451
Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. William J. Chastain, President & Director
(Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "METROPOLITAN AREA NETWORKS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF FEBRUARY, A.D. 2009.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7137833

DATE: 02-17-09