F9800000539/

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: GCB Communications Inc./dba Pacific Communications (Name of corporation - must include suffix) 700002640477· Dear Sir or Madam: *****70.00 ****70.00 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: Lisa Thompson (Name of Person) Pacific Communications (Firm/Company) 1025 E. Broadway Rd. #201 (Address) 85282 Tempe, AZ (City/State/Zip) Should you need to call someone concerning this matter, please call:

Lisa Thompson
(Name of Person)

at (602) 968-1700

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 16, 1998

LISA THOMPSON PACIFIC COMMUNICATIONS 1025 E. BROADWAY RD. #201 TEMPE, AZ 85282

SUBJECT: GCB COMMUNICATIONS INC.

Ref. Number: W98000021154

We have received your document for GCB COMMUNICATIONS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Letter Number: 998A00046927

Jennifer Sindt Document Examiner

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.

| (Name of corp | munications, Inc. oration; must include the word viations of like import in lang | "INCORPORA" | ΓΕD", "COM | PANY", "CO | RPORATION" | or of a | - |
|---------------------------------------|---|--|--------------------------------|--------------------------------|-------------------|-----------------|---|
| natural person | or partnership if not so contain | ed in the name a | t present.) | | | | |
| 2Ariz | ona y under the law of which it is | | 3 | V/A | nber, if applicat | | |
| (State or countr | y under the law of which it is i | incorporated) | | ' (FEI nur | nber, if applicat | ole) | |
| 4. <u>01-1</u> (Da | 0-98ate of incorporation) | 5 | perpetua uration: Yea | 1. r corp. will ce | ase to exist or " | perpetual") | - |
| | | | | | | | |
| (Date fir | Qualification st transacted business in Florid | a.) (SEE SECTION | ONS 607.150 | 1, 607.1502 a | nd 817.155, F.S | .) | _ |
| | E. Broadway Rd. | | | | | 98 S | DIVISE |
| | (Curide payphone serve(s) of corporation authorized in reet address of Florida regula Mayne 17126 Wayzata Ct | rrent mailing add | iress) | | | El 25 | ORFIGE OFF OFF OFF OFF OFF OFF OFF OFF OFF OF |
| 8 Prov | ide payphone serv | ice | <u>-</u> | - | | PX | |
| (Purpose | e(s) of corporation authorized i | in home state or | country to be | carried out in | state of Florida | | 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - |
| 9. Name and st | reet address of Florida reg | istered agent: | (P.O. Box o | or Mail Drop | Box NOT acc | eptable) | |
| Name: | Paula Mayne | | | ş | | .,, | |
| Office Address: | 17126 Wayzata Ct | | | - | | | |
| | North Ft. Myers | | , Flori | da, <u>33917</u> | | | |
| | | | | (Zip co | de) | | |
| 10. Registered | agent's acceptance: | | | | | | |
| in this application comply with the p | ned as registered agent and to n, I hereby accept the appoint novisions of all statutes relati ligations of my position as reg | ment as registere ve to the proper gistered agent. | ed agent and a and complete | agree to act is performance | n this capacity. | I further agree | e to |
| | Hails for (Re | gistered 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.

| Chairman: | Gregory C. Riggle | |
|-----------------|--|---|
| | 1025 E. Broadway Rd. #201 | |
| - | Tempe, AZ 85282 | |
| Vice Chairman: | William S. Levine | |
| | 1025 E. Broadway Rd. #201 | |
| | Tempe, AZ 85282 | |
| | | |
| Address: | | |
| | | |
| Director: | | |
| | | · |
| | | DIV 910 |
| B. OFFICERS | S (Street address only - P.O. Box NOT acceptable) | SECRY ISION 3 SEP |
| President: | Gregory C. Riggle | 2 OF THE TOTAL OF |
| Address: | 1025 E. Broadway Rd. #201 | PHIZ: |
| | Tempe, AZ 85282 | % 53 |
| Vice President: | Thomas W. Bade | 10 H |
| Address: | 1025 E. Broadway Rd. #201 | |
| | Tembe, AZ 85282 | |
| Secretary: | William Levine | |
| Address: | 1025 E. Broadway Rd. #201 | |
| | Tempe, AZ 85282 | |
| Treasurer: | William Levine | |
| Address: | 1025 E. Broadway Rd. #201 | |
| | Tempe, AZ 85282 | |
| NOTE: If nece | ssary, you may attach an addendum to the application listing additional officers and/or direc | ctors. |
| 13 | 92 | |
| | (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application | on) |
| 14 | Gregory C. Riggle, President (Typed or printed name and capacity of person signing application) | |





Office of the

CORPORATION COMMISSION

To all to whom these presents shall come, greeting:

I, Jack Rose, Executive Secretary of the Arizona Corporation Commission, do hereby certify that

***GCB_COMMUNICATIONS, INC. ***

a domestic corporation organized under the laws of the state of Arizona, did incorporate on January 14, 1991.

I further certify that this corporation has filed all affidavits and annual reports and paid all filing fees required to date and, therefore, is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the offical seal of the Arizona Corporation Commission. Done at Phoenix, the Capitol, this 3rd day of August, 1998, A. D.



Executive Secretary

BY: Die Regay