

X00702933

CERTIFICATE OF CORPORATE RECORDS

VERIZON ACCESS TRANSMISSION SERVICES

I, ROBIN CARNAHAN, Secretary of the State of the State of Missouri and Keeper of the Great Seal thereof, do hereby certify that the annexed pages contain a full, true and complete copy of the original documents on file and of record in this office for which certification has been requested.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 23rd day of December, 2005

Secretary of State



Certification Number: 8261732-1 Reference: Verify this certificate online at http://www.sos.mo.gov/businessentity/verification



State of Missouri

Robin Carnahan, Secretary of State

Corporations Division P.O. Box 778 / 600 W. Main Street, Rm 322 Jefferson City, MO 65102 File Number: 200534822402 X00702933 Date Filed: 12/13/2005 Expiration Date: 12/13/2010 Robin Carnahan Secretary of State

Registration of Fictitious Name

(Submit with filing fee of \$7) (Must be typed or printed)

This information is for the use of the public and gives no protection to the name being registered. There is no provision in this Chapter to keep another person or business entity from adopting and using the same name. The fictitious name registration expires 5 years from the filing date. (Chapter 417, RSMo)

The undersigned is doing business under the following name, and at the following address:

Business name to be registered: Business Address:		Verizon Access Transmission Services 22001 Loudoun County Parkway			
City, State and Zip Code:		Asburn VA 20147			
The parties having an interest in t percentage owned. If all parties a	he business are jointly a	s, and the percentand severally liable	age they own are (If a busine e, percentage of ownership n	ss entity is owner, indiceed not be listed.):	cate business name and If listed,
3 F.C.		nd Number	Zip Code		Percentage of ownership must equal 100%
Weinetro Access Transmission	22001 L Parkwa	oudoun County	Asburn VA 20147		
Services LLC (D/B/A MCIM		_			
The undersigned understands that false stated th	tements made	in this filing are subje	correct: ect to the penalties provided under S Lenni for C. M.C. Printed Name		12/08/05 Date
uthorized Signature			Printed Name		Date
uthorized Signature		, , , , , , , , , , , , , , , , , , , ,	Printed Name		Date
Tame and address to return filed document:			State of Missouri Fictitious Creation 1 Page(s)		
Name:	 				(8 1818) (811 188)
Address: City, State, and Zip Code: T0534716698					
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