

Annual Report of Teleconnect Long Distance Services and Systems Company
for the calendar year of January 1 - December 31, 2013

VERIFICATION

The foregoing report must be verified by the oath of the President, Treasurer, General Manager or Receiver of the company. The oath required may be taken before any person authorized to administer an oath (Notary Public) by the laws of the State in which the same is taken.

OATH

State Of California }
County Of San Francisco } ss:

Haleh Davary makes oath and says that
Name of Affiant (Company Official/Representative)

s/he is Regulatory Analyst
Official Title of the Affiant (Company Official/Representative)

of Teleconnect Long Distance Services and Systems Company
Exact Legal Title or Name of the Respondent (Certificated Company Name)

and is located at 201 Spear Street, 7th Fl, San Francisco, CA 94105, (415) 228-1072 Public,
Address and Telephone Number of the Affiant (Company Official/Representative)

that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct.

from January 1, 2013, to and including December 31, 2013
Month/Day Year Month/Day Year

Haleh Davary
Signature of Affiant (Company Official/Representative)

Subscribed and sworn to before me, a Notary Public, in and for the State and County above named,

this 11th day of April, 2014

My Commission expires 08/13, 2015

Please see attached California Jurat
T. Co
Signature of Notary Public

Missouri Revised Statutes § 392.210 or §393.140

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

- See Attached Document (Notary to cross out lines 1-6 below)
- See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary)

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

Signature of Document Signer No. 1

Signature of Document Signer No. 2 (if any)

State of California

County of San Francisco

Subscribed and sworn to (or affirmed) before me

on this 11 day of APRIL, 2014
by Date Month Year

(1) HALAH DAVARY
Name of Signer

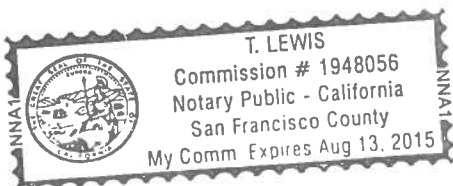
proved to me on the basis of satisfactory evidence to be the person who appeared before me (.) (.)

(and

(2) _____
Name of Signer

proved to me on the basis of satisfactory evidence - to be the person who appeared before me.)

Signature T. Lewis
Signature of Notary Public



Place Notary Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Further Description of Any Attached Document

Title or Type of Document: Verification

Document Date: 4/11/2014 Number of Pages: _____

Signer(s) Other Than Named Above: _____

RIGHT THUMBPRINT OF SIGNER #1

Top of thumb here

RIGHT THUMBPRINT OF SIGNER #2

Top of thumb here