

**United States of America  
State of Ohio  
Office of the Secretary of State**

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show AT&T CORP., a New York corporation, having qualified to do business within the State of Ohio on October 19, 1898 under License No. 48212 is currently in GOOD STANDING upon the records of this office.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 9th day of May, A.D. 2012*

*Jon Husted*

Ohio Secretary of State

Validation Number: V2012129M93357



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/03/2008	200833800634	TRADE NAME RENEWAL (RNR)	25.00	.00	.00	.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

CT CORPORATION SYSTEM  
 4400 EASTON COMMONS WAY, SUITE 125  
 ATTN: TIMOTHY ROBERSON  
 COLUMBUS, OH 43219

# STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1053987

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**LUCKY DOG PHONE CO.**

and, that said business records show the filing and recording of:

Document(s)

**TRADE NAME RENEWAL**

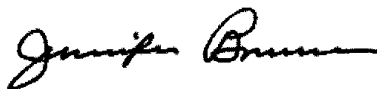
Document No(s):

**200833800634**



United States of America  
 State of Ohio  
 Office of the Secretary of State

Witness my hand and the seal of  
 the Secretary of State at Columbus,  
 Ohio this 2nd day of December,  
 A.D. 2008.



Ohio Secretary of State



Prescribed by :

The Ohio Secretary of State  
Central Ohio: (614) 466-3910  
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.sos.state.oh.us  
e-mail: busserv@sos.state.oh.us

<b>Expedite this Form:</b> (Select One)	
<b>Mail Form to one of the Following:</b>	
<input type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input type="radio"/> No	PO Box 788 Columbus, OH 43216

**RENEWAL**  
(For Domestic or Foreign, Profit or Nonprofit)  
Filing Fee \$25.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

**(CHECK ONLY ONE (1) BOX)**

<input checked="" type="checkbox"/> Renewal of Trade Name (172-RNR) Reg. No. <u>1053987</u>	<input type="checkbox"/> Renewal of Fictitious Name (159-NFR) Reg. No. _____	<input type="checkbox"/> Renewal of Service Mark or Trademark (166-TSMR) Reg. No. _____ Must Be Accompanied by Specimen
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Name of Entity or Description of Mark to be Renewed

Lucky Dog Phone Company

Name of Applicant  
Renewing Name or Mark

AT&T Corp.  
(Name of Applicant)

**The Applicant is (Check Appropriate Box)**

<input type="checkbox"/> Individual	<input checked="" type="checkbox"/> Foreign Corporation incorporated in the state of <u>New York</u> holding Ohio license no. <u>48212</u>
<input type="checkbox"/> Limited Partnership: Secretary of State Reg. No. _____	<input type="checkbox"/> Unincorporated Association
<input type="checkbox"/> Ohio Limited Liability Company, Reg. No. _____	<input type="checkbox"/> Foreign Limited Liability Company holding Ohio Reg. No. _____ organized in the state of _____
<input type="checkbox"/> Ohio Corporation, Charter No. _____	
<input type="checkbox"/> General Partnership	
<input type="checkbox"/> Other _____	

RECEIVED  
2008 DEC -2 PM 3:25

Business Address One AT&T Way  
(Street Address) **NOTE: P.O. Box Addresses are NOT acceptable.**

Bedminster Somerset NJ 07921  
(City) (County) (State) (Zip Code)

General Partners Names & Addresses (If Applicable)  
(Attach Additional Sheet If Needed)

**REQUIRED**  
Must be authenticated (signed) by an authorized representative (See Instructions)

[Signature]  
Authorized Representative

11/26/08  
Date



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/17/2009	200919701686	TRADE NAME/ORIGINAL FILING (RNO)	50.00	200.00	.00	.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

CT CORPORATION SYSTEM  
 4400 EASTON COMMONS WAY, SUITE 125  
 ATTN: TIMOTHY ROBERSON  
 COLUMBUS, OH 43219

# STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1870385

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**AT&T BUSINESS SOLUTIONS**

and, that said business records show the filing and recording of:

Document(s)

**TRADE NAME/ORIGINAL FILING**

Date of First Use: 10/31/2008  
 Expiration Date: 07/16/2014

Document No(s):

**200919701686**

AT&T CORP.  
 ONE AT&T WAY  
 BEDMINSTER, NJ 07921



United States of America  
 State of Ohio  
 Office of the Secretary of State

Witness my hand and the seal of  
 the Secretary of State at Columbus,  
 Ohio this 16th day of July, A.D.  
 2009.

Ohio Secretary of State



Prescribed by:

The Ohio Secretary of State  
Central Ohio: (614) 466-3910  
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.sos.state.oh.us

e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following:

Yes PO Box 1390  
Columbus, OH 43216  
\*\*\* Requires an additional fee of \$100 \*\*\*

No PO Box 670  
Columbus, OH 43216

**NAME REGISTRATION**  
(For Domestic/Foreign Profit or Nonprofit)  
Filing Fee \$50.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) <input checked="" type="checkbox"/> Trade Name (167-RNO) Date of first use <u>10/31/2008</u> MM/DD/YYYY	(2) <input type="checkbox"/> Fictitious Name (169-NFO)	(3) Name Reservation (160-NRO) <input type="checkbox"/> Original <input type="checkbox"/> Renewal Registration No.
--	---	---

Complete the information in this section if box (1) or (2) is checked.

The exact name being registered or reported is AT&T Business Solutions

The Registrant is (Check Appropriate Box)

- |   |  |
|---|--|
| <input type="checkbox"/> Individual                                 | <input checked="" type="checkbox"/> Foreign Corporation incorporated in the state of <u>New York</u> |
| <input type="checkbox"/> Limited Partnership: Reg. No. _____        | holding Ohio license no. <u>48212</u>  |
| <input type="checkbox"/> Ohio Limited Liability Co., Reg. No. _____ | <input type="checkbox"/> Unincorporated Association  |
| <input type="checkbox"/> Ohio Corporation, Charter No. _____        | <input type="checkbox"/> Foreign Limited Liability Co. holding Ohio Reg. No. _____                   |
| <input type="checkbox"/> General Partnership                        | organized in the state of _____  |
| <input type="checkbox"/> Other _____                                |  |

The name of the registrant designated above is

AT&T Corp.

NOTE: Where the registrant is a partnership, the name of the partnership must appear on this line. If the registrant is a foreign corporation licensed in Ohio under an assumed name, both the assumed name and actual corporate title of such corporation must appear on this line.

The business address of the registrant is

One AT&T Way

(Street)

NOTE: P.O. Box Addresses are NOT acceptable.

Bedminster

(City)

Somerset

(County)

New Jersey

(State)

07921

(Zip Code)

Complete the information in this section if box (1) or (2) is checked Cont..

Complete only if registrant is a general partnership

NAME OF ALL GENERAL PARTNERS

COMPLETE RESIDENTIAL ADDRESSES (Including zip code)

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign (out-of-state) corporation, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation licensed in Ohio under an assumed name, please note both the assumed name and actual corporate title of such general partner.

The nature of the business conducted by the registrant under the trade or fictitious name is (please be specific)

Telecommunications

Complete the information in this section if box (3) is checked.

Please reserve the name listed below. (only one name per form)

Please reserve the first name available in the order of my preference.

I understand that I am not guaranteed the reservation UNTIL I RECEIVE WRITTEN CONFIRMATION FROM THE SECRETARY OF STATE'S OFFICE STATING THAT THE NAME HAS BEEN REGISTERED TO ME

The name reservation is valid for a period of 180 days.

(First Choice)

(Second Choice)

(Third Choice)

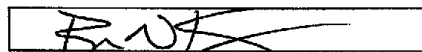
(Applicant)

(Print Name)

(Address)

(City, State and Zip Code)

**REQUIRED**  
Must be authenticated (signed)  
by an authorized representative  
(See Instructions)



Authorized Representative Ryan N. Kenigsberg



Authorized Representative

7/15/2009

Date



Date



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/26/2004	200420800574	FICTITIOUS NAME/ORIGINAL FILING (NFO)	50.00	100.00	.00	.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

C.T. CORPORATION SYSTEM  
17 S. HIGH STREET  
COLUMBUS, OH 43215

# STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

1478504

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**ACC BUSINESS**

and, that said business records show the filing and recording of:

Document(s)

**FICTITIOUS NAME/ORIGINAL FILING**

Expiration Date: 07/26/2009

Document No(s):

**200420800574**

AT&T CORP.  
32 AVENUE OF THE AMERICAS  
NEW YORK, NY 10013



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of  
the Secretary of State at Columbus,  
Ohio this 26th day of July, A.D.  
2004.

*J. Kenneth Blackwell*  
Ohio Secretary of State



Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State  
Central Ohio: (614) 466-3910  
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos

e-mail: busserv@sos.state.oh.us

**Expedite this Form:** (Select One)

**Mail Form to one of the Following:**

Yes PO Box 1390  
Columbus, OH 43216  
\*\*\* Requires an additional fee of \$100 \*\*\*

No PO Box 670  
Columbus, OH 43216

**NAME REGISTRATION**

(For Domestic/Foreign Profit or Non-Profit)

Filing Fee \$50.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

**(CHECK ONLY ONE (1) BOX)**

<p><b>(1)</b> <input type="checkbox"/> Trade Name (167-RNO) Date of first use _____ MM/DD/YYYY</p>	<p><b>(2)</b> <input checked="" type="checkbox"/> Fictitious Name (169-NFO)</p>	<p><b>(3)</b> Name Reservation (160-NRO) <input type="checkbox"/> Original <input type="checkbox"/> Renewal Registration No. _____</p>
--	---	--

**Complete the information in this section if box (1) or (2) is checked.**

The exact name being registered or reported is ACC BUSINESS

**The Registrant is (Check Appropriate Box)**

<input type="checkbox"/> Individual	<input checked="" type="checkbox"/> Foreign Corporation incorporated in the state of <u>New York</u> holding Ohio license no. <u>48212</u>
<input type="checkbox"/> Limited Partnership: Reg. No. _____	<input type="checkbox"/> Unincorporated Association
<input type="checkbox"/> Ohio Limited Liability Co., Reg. No. _____	<input type="checkbox"/> Foreign Limited Liability Co. holding Ohio Reg. No. _____ organized in the state of _____
<input type="checkbox"/> Ohio Corporation, Charter No. _____	
<input type="checkbox"/> General Partnership	
<input type="checkbox"/> Other _____	

The name of the registrant designated above is AT&T Corp.

**NOTE:** Where the registrant is a partnership, the name of the partnership must appear on this line. If the registrant is a foreign corporation licensed in Ohio under an assumed name, both the assumed name and actual corporate title of such corporation must appear on this line.

The business address of the registrant is

32 Avenue of the Americas  
(Street) **NOTE: P.O. Box Addresses are NOT acceptable.**

New York NY 10013  
(City) (County) (State) (Zip Code)



Complete the information in this section if box (1) or (2) is checked Cont.

Complete only if registrant is a general partnership

NAME OF ALL GENERAL PARTNERS

COMPLETE RESIDENTIAL ADDRESSES (including zip code)

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign (out-of-state) corporation, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation licensed in Ohio under an assumed name, please note both the assumed name and actual corporate title of such general partner.

The nature of the business conducted by the registrant under the trade or fictitious name is (please be specific)

Telecommunications Services

Complete the information in this section if box (3) is checked.

Please reserve the name listed below. (only one name per form)

Please reserve the first name available in the order of my preference.

I understand that I am not guaranteed the reservation UNTIL I RECEIVE WRITTEN CONFIRMATION FROM THE SECRETARY OF STATE'S OFFICE STATING THAT THE NAME HAS BEEN REGISTERED TO ME.

The name reservation is valid for a period of 180 days.

(First Choice)

(Second Choice)

(Third Choice)

(Applicant)

(Print Name)

(Address)

(City, State and Zip Code)

REQUIRED

Must be authenticated (signed) by an authorized representative (See Instructions)

[Signature]

Authorized Representative

7/15/04

Date

[Blank Signature Box]

Authorized Representative

[Blank Date Box]

Date