Lance J.M. Steinhart, P.C.

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ORIGINAL

2007 MAR -8 PM 12: "5

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March 7, 2007

VIA OVERNIGHT DELIVERY

Florida Public Service Commission Division of Competitive Markets and Enforcement Certification

2540 Shumard Oak Blvd.

Gunter Bldg.

Tallahassee, Florida 32399-0850

Budget PrePay, Inc. d/b/a Budget Phone k/k/a Budget Phone, Inc. Re:

Dear Sir/Madam:

I am writing this letter in order to notify the Commission that Budget Phone, Inc. has changed its name to Budget PrePay, Inc. d/b/a Budget Phone.

Budget PrePay, Inc. d/b/a Budget Phone is qualified to do business in the State of Florida as evidenced by a copy of the Certificate of Authority issued by the Florida Secretary of State and attached hereto. Upon Commission's notification to our office, the company will file revised tariff labels.

Please return a stamped copy of the extra copy of this letter in the enclosed preaddressed prepaid envelope.

If you have any questions regarding the foregoing, please do not hesitate to call me. Thank you for your attention to this matter.

Sincerely,

Angela Janssen, Legal Assistant to

Lance J.M. Steinhart, Esq.

Attorney for Budget PrePay, Inc. d/b/a Budget Phone

f/k/a Budget Phone, Inc.

Enclosures

Mr. Ron Munn cc:

DOCUMENT NUMBER - DATE

02132 MAR-85

FPSC-COMMISSION CLERK

ED & FILED

FPSC-BUREAU OF RECORDS



2007 MAR -8 PM 12: '7

FLORIDA DEPARTMENT OF STATE LIFE SHOW OF Division of Corporations COMPETITIVE SERVICES

March 13, 2006

LANCE J.M. STEINHART, P.C. ANGELA JANSSEN 1720 WINDWARD CONCOURSE, STE. 250 ALPHARETTA, GA 30005

Re: Document Number F99000001380

The Amendment to the Application of a Foreign Corporation for BUDGET PHONE, INC. which changed its name to BUDGET PREPAY, INC., a Louisiana corporation authorized to transact business in Florida, was filed on March 2, 2006.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Cheryl Coulliette Document Specialist Division of Corporation

Letter Number: 806A00017046

PROFIT CORPORATION

APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

Budget Phone, Inc.	
Name of corporation as it appears on the records of the Department of State.	
2. Louisiana	3/12/99
Incorporated under laws of	Date authorized to do business in Florida
(4-7 COMPLETE O	SECTION II ONLY THE APPLICABLE CHANGES)
4. If the amendment changes the name of the corporation? December 20	oration, when was the change effected under the laws of 0, 2005
5. Budget PrePay, Inc.	
Name of corporation after the amendment, adding suffix "not contained in new name of the corporation. 6. If the amendment changes the period of duration	corporation" "company" or "incorporated," or appropriate abbreviation, if
No Change	Say 📜
7. If the amendment changes the jurisdiction of inc	New Duration Corporation, indicate new jurisdiction.
No Change	9: 10 GRIDA
X W Signature	New Jurisdiction X 2-\-06 Date
R. Daniel Hyde, Jr.	President
Typed or printed name	Title



March 13, 2006

BUDGET PHONE 1325 BARKSDALE BLVD. SUITE 200 BOSSIER CITY, LA 71111

Subject: BUDGET PHONE

REGISTRATION NUMBER: G06061900007

This will acknowledge the filing of the above fictitious name registration which was registered on March 13, 2006. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES. Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at (850) 245-6058.

Reinstatement Section Division of Corporations

Letter No. 806A00017050



Department of State

I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of BUDGET PHONE, registered with the Department of State on March 13, 2006, as shown by the records of this office.

The Registration Number of this Fictitious Name is G06061900007.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Thirteenth day of March, 2006



CR2EO22 (01-06)

Sue AH. Cloth Secretary of State

Note: Acknowledgements/certificates will be sent to the address in Section 1 only. Section 1 Budget Phone Fictitious Name to be Registered 06 MAR 13 5% 9: 28 1325 Barksdale Blvd., Ste. 200, Bossier City, LA 71111 Mailing Address of Business State Zip Code City 3. Florida County of principal place of business: Dade 4. FEI Number: 72-1335380 This space for office use only Section 2 A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary): Last M.I. Last ΜI Address Address City Zip Code State City State . Zip Code SS# (optional) B. Owner(s) of Fictitious Name If other than individuals(s): (Use attachment if necessary): Budget PrePay, Inc. Entity Name 13/02/06--01029--003 **80.00 Entity Name 1325 Barksdale Blvd. Ste. 200 Address Address LA **Bossier City** 71111 Zip Code State Zip Code City State Florida Registration Number 79900001380 FEI Number: 72-1335380 Applied for Not Applicable Florida Registration Number _ FEI Number: Not Applicable ☐ Applied for Section 3 I (we) the unders/ghed, being the sole/all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is at the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature (we) understand true and accura Required) Signature of Owner Phone Number: (318) 671-5000 Signature of Owner Phone Number: Section 4 FOR CANCELLATION COMPLETE SECTION 4 ONLY: FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4: I (we) the undersigned, hereby cancel the fictitious name ___ and was assigned registration number ___ _ which was registered on ___ Signature of Owner Signature of Owner Date Mark the applicable boxes

Filing Fee: \$50

☐ Certificate of Status - \$10 ☐ Certified Copy - \$30

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

CR4E-001(6/01)