

# ELLIS:LAWHORNE

Carol Roof  
Direct dial: 803/779-0066  
[croof@ellislawhorne.com](mailto:croof@ellislawhorne.com)

February 15, 2006

Ms. Lisa Foust  
Tennessee Regulatory Authority  
Telecommunications Department  
460 James Robertson Parkway  
Nashville, TN 37243-0505

RE: Application of OneTone Telecom, Inc. for a Certificate to Provide  
Operator Services and/or Resell Telecommunications Services  
In Tennessee  
**Docket No. 06-00023, Our File No. 539-10343**

Dear Lisa:

Please find the original and thirteen (13) copies of the Response of OneTone Telecom, Inc. to the Tennessee Regulatory Authority's Request for Additional Information for filing on behalf of OneTone Telecom, Inc. in the above-referenced docket.

**Item #1: Provide the name, business and home address of and a chronological summary of the employment history and business experience over the preceding eight years of each Executive Officer, Director and each Key Stockholder if the applicant is a joint stock association or corporation:**

Response: Key shareholders and executive officers are the same for OneTone Telecom, Inc. See list below.

1. Travis T. Crane - Chairman/CEO of OneTone Telecom for 11 years.

Business Address: 100 Century Plaza, Suite 9-I  
Seneca SC 29672  
Business Phone: 864/985-1735

Home Address: Travis T. Crane  
1012 N. Shore Dr.  
Anderson, SC 29625  
Home Phone: 864/231-0960

2. J. Christopher Dixon - President/COO of OneTone Telecom for the last 5 years. Prior to working for OneTone Telecom, Mr. Dixon was a V.P. at Actel Communications for 3 years.

Business Address: 100 Century Plaza, Suite 9-I  
Seneca SC 29672  
Business Phone: 864/985-1735

Home Address: 115 Winding Creek Lane  
Seneca, SC 29672  
Home Phone: 864/888-2906

3. Rodger S. Loggins -V.P. of Finance for 11 years at OneTone Telecom.

Business Address: 100 Century Plaza, Suite 9-I  
Seneca SC 29672  
Business Phone: 864/985-1735

Home Address: 108 Quail Haven Dr.  
Walhalla, SC 29691  
Home Phone: 864/638-7160

**Item #2: Provide a statement of understanding and willingness to comply with Tennessee Code Ann §65-21-114, which provides for toll free calling within the same county in Tennessee.**

Response: OneTone Telecom, Inc. understands Tennessee Code Ann §65-21-114, which provides for toll-free calling within the same county in Tennessee and it will subscribe to the TAR Code Data Base that BellSouth supplies. See statement signed by CEO attached to this letter as **Exhibit 1**.

**Item #3: Identify the carrier whose interexchange services OneTone will be reselling.**

Response: OneTone will be reselling the interexchange services of Red River Telecom.

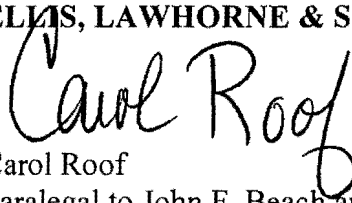
Thank you for all the help you have provided to me in completing the application process in this docket. Please let me know immediately if you need any additional information in order to grant the approval of OneTone Telecom's application.

Ms. Lisa Foust  
February 15, 2006  
Page 3

Please return a copy of this letter to me in the return envelope, enclosed for your convenience.

Sincerely,

**ELLIS, LAWHORNE & SIMS, P.A.**

A handwritten signature in black ink that reads "Carol Roof". The signature is written in a cursive style with a large, looped "C" and "R".

Carol Roof  
Paralegal to John F. Beach and John J. Pringle, Jr.

Attachment

JJP/cr

cc Mr. Travis Crane [via electronic mail service]  
Mr. Seth Chea [via electronic mail service]



## TENNESSEE REGULATORY AUTHORITY

460 James Robertson Parkway  
Nashville, Tennessee 37243-0505

February 9, 2006

Ellis, Lawhorne & Sims, P.A.  
Attention John Pringle  
1501 Main Street, 5<sup>th</sup> Floor  
PO Box 2285  
Columbia, South Carolina 29202

RE: OneTone Telecom, Inc.  
*Application for a Certificate to Resell Interexchange and Local Telecommunications  
Services in Tennessee.*  
Docket Number 06-00023.

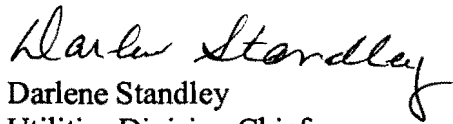
Dear Mr. Pringle:

The Staff of the Tennessee Regulatory Authority has received the above application and we are in need of additional information to complete our review of the request for certification. Please provide the following:

1. Part I of the application, question C., "Provide the name, business and home address of and a chronological summary of the employment history and business experience over the preceding eight years of:
  - a) The proprietor, if the applicant is an individual;
  - b) Every member, if the applicant is a partnership;
  - c) Each Executive Officer, Director and each Key Stockholder if the applicant is a joint stock association or a corporation;
  - d) Any person in a position to exercise control over the direction of, the business of the applicant, regardless of the form of organization of the applicant.
2. Provide a statement of understanding and willingness to comply with Tenn. Code Ann. § 65-21-114, which provides for toll free calling within the same county in Tennessee.
3. Identify the carrier whose interexchange services OneTone will be reselling.

Please provide this information no later than 2:00 pm on February 24, 2006 and reference docket number 06-00023 on the response. In accordance with Tennessee Regulatory Authority rules, please provide either (1) thirteen written copies of your response, or (2) four written copies and an electronic version. Should you have questions regarding this request, please contact Lisa Foust at (615) 741-2904, extension 220.

Sincerely,

A handwritten signature in cursive script that reads "Darlene Standley". The signature is written in dark ink and is positioned above the printed name and title.

Darlene Standley  
Utilities Division Chief

# ELLIS:LAWHORNE

John J. Pringle, Jr.  
Direct dial: 803/343-1270  
[jpringle@ellislawhorne.com](mailto:jpringle@ellislawhorne.com)

T.R.A. DOCKET ROOM

January 25, 2006

PAID T.R.A.	
Chk #	92416
Amount	50.00
Rcvd By	JP
Date	1-26-06

## VIA FEDERAL EXPRESS

Tennessee Regulatory Authority  
Telecommunications Department  
460 James Robertson Parkway  
Nashville, TN 37243-0505

RE: Application of OneTone Telecom, Inc. for a Certificate to Provide  
Operator Services and/or Resell Telecommunications Services  
In Tennessee  
**Our File No. 539-10343**

To Whom It May Concern:

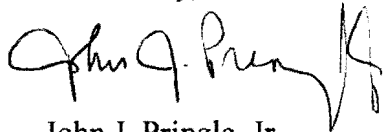
Please find the original and thirteen (13) copies of the **Application** for filing on behalf of OneTone Telecom, Inc. in the above-referenced matter. Also enclosed is the required \$50.00 filing fee.

Please return a copy of the filing letter to me in the return envelope, enclosed for your convenience.

Please do not hesitate to contact me with any questions you may have.

With kind regards, I am

Yours truly,



John J. Pringle, Jr.

JJP/cr  
cc Mr. Travis Crane



- B. Describe other businesses or business transactions, if any, at the same location as the principal business address:


- C. Provide the name, business and home address of and a chronological summary of the employment history and business experience over the preceding eight years of:

- (a) The proprietor, if the applicant is an individual;
- (b) Every member, if the applicant is a partnership;
- (c) Each Executive Officer, Director and each Key Stockholder if the applicant is a joint stock association or a corporation. (Note: If the applicant is a publicly traded corporation or a subsidiary of such a corporation it does not need to provide this information)
- (d) Any person in a position to exercise control over or direction of, the business of the applicant, regardless of the form of organization of the applicant.

Information to be included:

NAME TITLE

BUSINESS ADDRESS

PHONE No.

HOME ADDRESS

PHONE No.

EMPLOYMENT HISTORY

**Provide the above requested information on separate attachments.**

- D. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) more shareholders or beneficiaries (of a trust) been associated with a business whose authority to transact business was denied, revoked or suspended by a state or federal regulatory or law enforcement entity?

☐ Yes ☒ No If yes, please explain fully.

- E. Has the Tennessee Regulatory Authority, or any other agency of the State of Tennessee, any federal agency or any agency of any other state ever initiated a regulatory action or order against the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) more shareholders or beneficiaries (of a trust)?

☐ Yes ☒ No If yes, please explain fully.

(1) Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) more shareholders or beneficiaries (of a trust), been enjoined or restrained by order by any court or state or federal regulatory or law enforcement entity from engaging in any conduct or practice related to the telecommunications business? ☐ Yes ☒ No If yes, please explain fully.

- F. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) more shareholders or beneficiaries (of a trust) been associated with a business who has ceased providing telecommunications services in any state, describe the circumstances. (Use additional pages if necessary)



- G. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, L.L.C. members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been convicted of any crime or crimes, or charged in court with any fraudulent or dishonest acts in any transaction of any kind, or confined in any penal institution? If so, list such persons, give details, state results and final outcome. (Use additional pages if necessary)

(1) Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, L.L.C. members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been indicted, convicted, pled guilty or pled nolo contendere to a felony in Tennessee or elsewhere?

☐ YES ☒ NO If yes, please explain fully.

- H. Name and telephone number of contact person authorized to respond to Authority inquiries regarding company operations Monday through Friday.

<input type="text" value="Travis T. Crane"/>	<input type="text" value="(864)985-1735"/>	<input type="text" value="864 885-9222"/>
Name	Phone No.	Fax No.
(800) <input type="text" value="216-1037"/>	e-mail Address <input type="text" value="tcrane@1tone.net"/>	

(1) Name and telephone number of contact person authorized to respond to Authority inquiries regarding this filing Monday through Friday.

<input type="text" value="Travis T. Crane"/>	<input type="text" value="(864)985-1735"/>	<input type="text" value="864 885-9222"/>
Name	Phone No.	Fax No.
(800) <input type="text" value="216-1037"/>	e-mail Address <input type="text" value="tcrane@1tone.net"/>	

- I. List a toll-free telephone number and mailing address that consumers can call or write to report service problems and/or request refunds or adjustments.

<input type="text" value="888/216-1037"/>	<input type="text" value="864/985-1735"/>
PHONE NUMBER	ALTERNATE PHONE NUMBER
<input type="text" value="100 Century Plaza, Suite 9-I, Seneca SC 29672"/>	
ADDRESS	CITY ST ZIPCODE

- (J) Provide the name and address of the registered agent for service of process:

<input type="text" value="CT Corporation Systems"/>
<input type="text" value="800 S. Gay St., Suite 2021, Knoxville TN 37929-9710"/>

- (K) Identify all authorized agents in the state, if any by name, address, business and home phone numbers and any other businesses conducted by the agent at the same location: (use additional sheets if necessary)

Part II:

- A. Check the type of telecommunication services you plan to provide in Tennessee.

<input checked="" type="checkbox"/> Resell Interexchange long distance services
<input type="checkbox"/> Operator Services
<input checked="" type="checkbox"/> Resell local services
<input type="checkbox"/> Other (describe) <input type="text"/>

- B. If providing operator services, list company name, address and contact person for all reseller carriers you serve in Tennessee. Provide the above information on Appendix I.

- C. List the state(s) where the applicant, its parent company, and all affiliates is authorized to operate in at this time. For each such state, describe applicant's current activities along with a history of operations there. (Use additional pages if necessary.)

South Carolina, Georgia, and North Carolina. The company currently offers resold services (both local exchange and interexchange) to residential and business customers. The company has been providing services in those states for 3 years.

For the above states, list the number and types of complaint(s) filed against applicant, and the complaint(s)' current status. Provide this information on a separate attachment, if necessary.

No complaints have been filed in any states.

If applicant has affiliate(s) or parent company, or constituency corporations, engaged in providing telecommunications services, or operating under any trade name, assumed name or fictitious name used by the above, provide the above requested information for all as well as for the applicant. Provide this information on a separate attachment, if necessary.

- D. List any states that the applicant or any affiliate, parent company, or constituency corporation operating under any trade name, assumed name, or fictitious name, has been denied authority to provide service. (Use additional pages if necessary)

none

- E. Areas in Tennessee to be served.

OneTone will only serve customers in BellSouth's territory.

- F. What type of customers will the applicant serve?

- a. Business ☒  
b. Residential ☒  
c. Aggregators ☐  
(e.g. Hotels, Payphones)  
d. Other (specify)

- G. Does the applicant allow a property imposed fee (PIF) to be added to the price of intrastate telephone calls over its network? If yes, specify amount. no

- H. Are your prices for intrastate services plus any PIF equal to or less than the dominant carriers' price for similar services? Yes ☒ No ☐

- I. Describe the type of services and price that the applicant will be offering in Tennessee on the Informational Tariff Form found in Appendix II<sup>1</sup>.

- J. What is the applicant's 10XXX or 800 access code, if applicable? n/a

- K. Does the applicant now have or plan to have any telecommunication's facilities (e.g. switches, fiber lines) in Tennessee?

Not at the current time.

<sup>1</sup>Applicant is required to fill out an Informational Tariff form. Failure to fill out this form will cause the applicant's request to be rejected.

L Whose facility-based network(s) will the applicant be reselling?  
BellSouth Telecommunications, Inc.

M Will the applicant be utilizing the local telephone company's billing system or billing customers directly?<sup>2</sup> OneTone will be billing customers directly.

N Describe briefly how the applicant plans to market their services in Tennessee?  
OneTone will market their services via all forms of media directly, including agents and storefronts.

O If independent telemarketers are to be used, list the name, contact person, address phone number and federal taxpayer ID for each company.  
n/a

COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE
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COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE
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COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE
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COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE
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P Describe the methods and procedures by which the applicant will use to switch a consumer's preferred interexchange service, and to prevent unauthorized switching of a consumer's interexchange service. Use additional pages if necessary. If you have written procedures or company guidelines, attach copies.

The Company will comply with the FCC's Rules applicable to PIC changes.

Q. Applicant has the ability and agrees to honor the form of call blocking that the consumer has subscribed to with their local telephone company. Yes ☒ No ☐

R Applicant gives permission to the local telephone company to provide the Authority a periodic sample of the reseller's intrastate toll calls. The purpose of this analysis is to audit the reseller's rates to assure they are at or below the dominant carrier's tariffed rates. Yes ☒ No ☐

<sup>2</sup>A copy of a bill is required if the applicant is going to bill the customer directly.

**Part III: Organization Structure**

**A. Applicant's organizational structure**

☒ Corporation

☐ Publicly Traded Corporation

☐ Subsidiary of a Publicly Traded Corporation

☐ Limited Liability Corporation **Attach a copy of the articles of organization and operating agreement along with amendments.**

☐ Other Form of Corporation

List type S Corporation. See Articles  
& Amendments - Exhibit Two (Example S Corporation)  
**Attach a copy of the charter, bylaws and/or certificate of incorporation.**

☐ Association **Attach a copy of the charter, bylaws and/or certificate of incorporation and Letter of Authorization from Tennessee Secretary of State**

☐ Joint Stock Association **Attach a copy of the charter, bylaws and/or certificate of incorporation and Letter of Authorization from Tennessee Secretary of State.**

☐ Trust **Attach a copy of the trust agreement and Letter of Authorization from Tennessee Secretary of State.**

☐ Individual **Attach a copy of the Letter of Authorization from Tennessee Secretary of State**

**SECTION (a)-(g) is to be completed if applicant is a Corporation Association or Trust**

(a) The date and state of formation/incorporation:

(1) Parent Company, if applicable

(b) Attach a certificate of good standing from the state in which the applicant was incorporated/formed.

(1) Attach a copy of Certification of Authority issued by Tennessee Secretary of State showing corporation's authority to engage in business in Tennessee.

(d) Describe the corporate structure of the applicant, including the identity of any parent or subsidiary of the applicant. Disclose whether any parent or subsidiary is publicly traded on any stock exchange.

(e) Provide the history of material litigation and criminal convictions of every current director, executive officer, or key shareholder of the applicant for the ten-year period prior to the date of this application.

(f) If applicable, attach a copy of the instrument creating the trust and all amendments thereto:

**B. ☐ Proprietorship**

☐ Partnership

☐ General Attach a copy of the partnership agreement along with any amendments.

☐ Limited Attach a copy of the certificate of limited partnership and the partnership agreement along with any amendments.

☐ Other (Explain on separate sheet)

All of the above will be required to submit a valid business license.

- (a) Identify the place and date of the applicant's qualifications to provide telecommunications services in this state.
- (b) List the full name, social security number and address of the owners, if a sole proprietorship, or all partners identifying the percentage of ownership:  
**ATTACH ADDITIONAL PAGES AS NECESSARY**

C. Number of employees: 75+

Employer Identification Number (E.I.N.) 57-1040699

Part IV: Financial Information

A. Address where business records are kept: 100 Century Plaza, Suite 9-I

Seneca,	SC	29672	864/985-1735
CITY	STATE	ZIP CODE	PHONE NUMBER

B. Attach a copy of the applicant's most recent unconsolidated and consolidated audited financial statements for the immediately preceding three-year period. Provide in detail the applicant's financial condition, including balance sheet and income statement, or a copy of IRS form 1120 or 1065 filed by your business for the previous year. Attach, if available, a copy of your company's 10K and/or stockholder reports.

(1) Fiscal year end: Month December Day 31st

(2) Date of most recent audited, unconsolidated financial statement of Applicant:  
December 31, 2005

(3) If applicable, name and address of independent certified public accountant:

N/A

(4) Period covered by financial statement attached: 2005

C. Does the applicant currently have an internal auditor and/or internal audit program? yes

If so, Name of internal auditor Oasis - automated audit program

D. If applicable, provide a history of applicant's material litigation and criminal convictions for the ten-year period prior to the date this application is made. Material litigation is defined as any litigation that, according to generally accepted accounting principles, is deemed significant to a person's financial health and would be required to be referenced in annual audited financial statements, reports to shareholders or similar documents.

**Part VI: Rule Compliance Agreement**

- A. Attach a copy of a Small and Minority-Owned Telecommunications Business Participation Plan Pursuant to Tennessee Code Annotated § 65-5-212.
- B. Have you read and understand the Tennessee Regulatory Authority's (TRA) Rules and Regulations for Resellers, 1220-4-2 located at the TRA's website <http://www.state.tn.us/tra> *electronic filerom* in its entirety?  
☒ Yes ☐ No
- C. Do you understand the penalties for non-compliance, and all associated fees to provide such service? ☒ Yes ☐ No

Mail the completed application and a check for \$50.00 to: Tennessee Regulatory Authority, P.O. Box 198907, Nashville, TN 37219-8907. Should you have any questions, call (615) 741-7489, ext. 163.

The Reseller or Operator Service Provider applicant, hereby, affirms the following:

Will comply with the TRA Reseller Rules and all other applicable Authority Rules and state laws, including T.C.A. Section 65-5-206 located at the TRA's website <http://www.state.tn.us/tra> *electronic filerom* under the External Site of Lexis Law Publishing.

**Having been duly sworn, and under the penalties of perjury, I hereby certify that the representations in this RESELLER APPLICATION and all attachments and appendices are true and correct to the best of my knowledge and belief. I further understand that omissions or inaccuracies may result in denial of the APPLICATION and grounds for revocation of Certificate of Authority.**

For Individual and Partners:

_____ Signature	_____ Signature
_____ PRINTED NAME	_____ PRINTED NAME

_____ Signature	_____ Signature
_____ PRINTED NAME	_____ PRINTED NAME

For Corporations  
and Other Organizations

BY: OneTone Telecom, Inc.  
(NAME OF CORPORATION)  
*Travis T. Crane*  
SIGNATURE  
Travis T. Crane  
PRINTED NAME  
Chief Executive Officer  
Title

ATTEST: *Travis T. Crane*  
Chairman / CEO  
Title

On this the 17th day of January, 2006 before me, a Notary Public  
of the state of South Carolina

known to me to be the person(s) named in, and who executed the foregoing  
application, being duly sworn according to law, deposes and says that the statements  
and representations set forth in the above application are true and correct to the best  
of his/her knowledge and belief.

*M. J. O'Worley*  
Notary Public

seal

## Appendix I

Reseller Name	Address	Contact Person	Phone Number
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OneTone Telecom, Inc. 100 Century Plaza, Suite 9-I, Seneca SC 29672 ATTN: Travis T. Crane Office: 864/985-1735 Cell: 864/617-3398			
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**Appendix II**  
**Informational Tariff Sheet**

<u>Description of Service</u>	<u>Applicant proposed</u> <u>Price change to consumer</u>	<u>Dominant Carriers<sup>3</sup></u> <u>Price for similar service</u>
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1.	See Attached Information Tariff	
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2.		
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3.		
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<sup>3</sup>Dominant Carrier (South Central Bell or AT&T, whichever is appropriate). A copy of these companies' rates are found on Appendix V.

# Secretary of State

Division of Business Services

312 Eighth Avenue North

4 Floor, William R. Snodgrass Tower

Nashville, Tennessee 37243

DATE: 12/21/05

REQUEST NUMBER: 5631-1760

TELEPHONE CONTACT: (615) 741-2286

FILE DATE/TIME: 12/21/05 0825

EFFECTIVE DATE/TIME: 12/21/05 0825

CONTROL NUMBER: 0509171

TO:

ELLIS LAWHORNE & SIMS, P.A.

1501 MAIN ST-5TH FL

PO BOX 2285

COLUMBIA, SC 29202

RE:

ONETONE TELECOM, INC.

APPLICATION FOR CERTIFICATE OF AUTHORITY -

FOR PROFIT

WELCOME TO THE STATE OF TENNESSEE. THE ATTACHED CERTIFICATE OF AUTHORITY HAS BEEN FILED WITH AN EFFECTIVE DATE AS INDICATED ABOVE.

A CORPORATION ANNUAL REPORT MUST BE FILED WITH THE SECRETARY OF STATE ON OR BEFORE THE FIRST DATE OF THE FOURTH MONTH FOLLOWING THE CLOSE OF THE CORPORATION'S FISCAL YEAR. PLEASE PROVIDE THIS OFFICE WITH WRITTEN NOTIFICATION OF THE CORPORATION'S FISCAL YEAR. THIS OFFICE WILL MAIL THE REPORT DURING THE LAST MONTH OF SAID FISCAL YEAR TO THE CORPORATION AT THE ADDRESS OF ITS PRINCIPAL OFFICE OR TO A MAILING ADDRESS PROVIDED TO THIS OFFICE IN WRITING. FAILURE TO FILE THIS REPORT OR TO MAINTAIN A REGISTERED AGENT AND OFFICE WILL SUBJECT THE CORPORATION TO ADMINISTRATIVE REVOCATION OF ITS CERTIFICATE OF AUTHORITY.

WHEN CORRESPONDING WITH THIS OFFICE OR SUBMITTING DOCUMENTS FOR FILING, PLEASE REFER TO THE CORPORATION CONTROL NUMBER GIVEN ABOVE.

FOR: APPLICATION FOR CERTIFICATE OF AUTHORITY -  
FOR PROFIT

ON DATE: 12/21/05

FROM:  
ELLIS LAWHORNE & SIMS, PA  
POST OFFICE BOX 2285

	FEES	
RECEIVED:	\$600.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$600.00

COLUMBIA, SC 29202-0000

RECEIPT NUMBER: 00003832936  
ACCOUNT NUMBER: 00405801



*Riley C. Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE

FILED

State of Tennessee



## Department of State

Corporate Filings  
312 Eighth Avenue North  
6th Floor, William R. Snodgrass Tower  
Nashville, TN 37243

APPLICATION FOR  
CERTIFICATE OF AUTHORITY  
(FOR PROFIT)

Office Use Only  
RECEIVED  
STATE OF TENNESSEE  
SECRETARY OF STATE  
2005 DEC 21 AM 8:25  
FILED

Pursuant to the provisions of Section 48-25-103 of the Tennessee Business Corporation Act, the undersigned corporation hereby applies for a certificate of authority to transact business in the State of Tennessee, and for that purpose sets forth:

1. The name of the corporation is OneTone Telecom, Inc.

\*If different, the name under which the certificate of authority is to be obtained is \_\_\_\_\_

[NOTES: The Secretary of State of the State of Tennessee may not issue a certificate of authority to a foreign corporation for profit if its name does not comply with the requirements of Section 48-14-101 of the Tennessee Business Corporation Act. \*If obtaining a certificate of authority under a different corporate name, an application for registration of an assumed corporate name must be filed pursuant to Section 48-14-101(d) with an additional \$20.00 fee.]

2. The state or country under whose law it is incorporated is South Carolina

3. The date of its incorporation is March 4, 1996 (must be month, day, and year), and the period of duration, if other than perpetual, is \_\_\_\_\_

4. The complete street address (including zip code) of its principal office is  
100 Century Plaza, Suite 9-I Seneca SC 29672

Street City State/County Zip Code

5. The complete street address (including the county and the zip code) of its registered office in Tennessee and the name of its registered agent is  
800 S. Gay Street, Suite 2021, Knoxville TN 37929-9710

Street City State/County Zip Code

Registered Agent CT Corporation System

6. The names and complete business addresses (including zip code) of its current officers are: (Attach separate sheet if necessary.)

J. Christopher Dixon, President - 100 Century Plaza, Suite 9-I, Seneca SC 29672

Travis T. Crane, COO - 100 Century Plaza, Suite 9-I, Seneca SC 29672

7. The names and complete business addresses (including zip code) of its current board of directors are: (Attach separate sheet if necessary.)

Travis T. Crane, 100 Century Plaza, Suite 9-I, Seneca SC 29672

J. Christopher Dixon, 100 Century Plaza, Suite 9-I, Seneca SC 29672

8. If the corporation commenced doing business in Tennessee prior to the approval of this application, the date of commencement (month, day and year) n/a

9. The corporation is a corporation for profit.

10. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date/time is \_\_\_\_\_ (date), \_\_\_\_\_ (time).

[NOTE: A delayed effective date shall not be later than the 90th day after the date this document is filed by the Secretary of State.]

[NOTE: This application must be accompanied by a certificate of existence (or a document of similar import) duly authenticated by the Secretary of State or other official having custody of corporate records in the state or country under whose law it is incorporated. The certificate shall not bear a date of more than two (2) months prior to the date the application is filed in this state.]

12/19/05

Signature Date

Attorney

Signer's Capacity

OneTone Telecom, Inc.

Name of Corporation

John J. Pringle, Jr.

Signature

John J. Pringle, Jr., Esquire

Name (typed or printed)

5631.1750

# *The State of South Carolina*



*Office of Secretary of State Mark Hammond*

## **Certificate of Existence**

**I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:**

ONETONE TELECOM, INC.,  
a corporation duly organized under the laws of the State of South Carolina on March 4th, 1996, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great  
Seal of the State of South Carolina this  
14th day of December, 2005.

A handwritten signature in cursive script that reads "Mark Hammond".

Mark Hammond, Secretary of State