



LESA FOUNT

PayPhone Professionals

TRA
#1

David L. Maxey-Owner
3270 Prince George ST
Memphis, Tennessee 38115
901-794-3270/488-8486 (cell)

| | |
|-------------|---------|
| PAID T.R.A. | |
| Chk # | 1966 |
| Amount | 25.00 |
| Rcvd By | JS |
| Date | 3/22/07 |

March 19, 2007

TO: Mrs. Patsy Fulton, Utility Rate Specialist
Tennessee Regulatory Authority

RE: Name change

07-00074

Dear Mrs. Fulton,

Per our telephone conversation I am requesting that the TRA change the name of my pay telephone company from "David L. Maxey, dba PayPhone Professionals" to PayPhone Professionals, LLC. I have enclosed a copy of my approval from the Secretary of State, Mr. Riley Darnell.

Thank you for your prompt response.

Sincerely,

David L. Maxey

RECEIVED

MAR 23 2007

TN REGULATORY AUTHORITY
UTILITIES DIVISION

777570566
1966 - 281.03
25.00
3/22/07

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

DATE: 02/12/07
REQUEST NUMBER: 5950-1563
TELEPHONE CONTACT: (615) 741-2286
FILE DATE/TIME: 02/12/07 0052
EFFECTIVE DATE/TIME: 02/12/07 0052
CONTROL NUMBER: 0541153

TO:
PAYPHONE PROFESSIONALS LLC
3270 PRINCE GEORGE
ST
MEMPHIS, TN 38115

RE:
PAYPHONE PROFESSIONALS, LLC
ARTICLES OF ORGANIZATION -
LIMITED LIABILITY COMPANY

CONGRATULATIONS UPON THE FORMATION OF THE LIMITED LIABILITY COMPANY IN THE STATE OF TENNESSEE WHICH IS EFFECTIVE AS INDICATED ABOVE.

A LIMITED LIABILITY COMPANY ANNUAL REPORT MUST BE FILED WITH THE SECRETARY OF STATE ON OR BEFORE THE FIRST DAY OF THE FOURTH MONTH FOLLOWING THE CLOSE OF THE LIMITED LIABILITY COMPANY'S FISCAL YEAR. ONCE THE FISCAL YEAR HAS BEEN ESTABLISHED, PLEASE PROVIDE THIS OFFICE WITH WRITTEN NOTIFICATION. THIS OFFICE WILL MAIL THE REPORT DURING THE LAST MONTH OF SAID FISCAL YEAR TO THE LIMITED LIABILITY COMPANY 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 LIMITED LIABILITY COMPANY TO ADMINISTRATIVE DISSOLUTION.

WHEN CORRESPONDING WITH THIS OFFICE OR SUBMITTING DOCUMENTS FOR FILING, PLEASE REFER TO THE LIMITED LIABILITY COMPANY CONTROL NUMBER GIVEN ABOVE. PLEASE BE ADVISED THAT THIS DOCUMENT MUST ALSO BE FILED IN THE OFFICE OF THE REGISTER OF DEEDS IN THE COUNTY WHEREIN A LIMITED LIABILITY COMPANY HAS ITS PRINCIPAL OFFICE IF SUCH PRINCIPAL OFFICE IS IN TENNESSEE.

FOR: ARTICLES OF ORGANIZATION -
LIMITED LIABILITY COMPANY

ON DATE: 02/12/07

FROM:
PAYPHONE PROFESSIONALS
3270 PRINCE GEORGE S
MEMPHIS, TN 38115-0000

FEES
RECEIVED: \$300.00 \$0.00
TOTAL PAYMENT RECEIVED: \$300.00

RECEIPT NUMBER: 00004097537
ACCOUNT NUMBER: 00551013



Riley C. Darnell

RILEY C. DARNELL
SECRETARY OF STATE



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

ARTICLES OF ORGANIZATION
(LIMITED LIABILITY COMPANY)

(For use on or after 7/1/2006)

For Office Use Only

FILED

RECEIVED
STATE OF TENNESSEE
2007 FEB 2 PM 12:59
SECRETARY OF STATE

5950.1563

The Articles of Organization presented herein are adopted in accordance with the provisions of the Tennessee Revised Limited Liability Company Act.

1. The name of the Limited Liability Company is: PayPhone Professionals, LLC

(NOTE: Pursuant to the provisions of TCA §48-249-106, each limited Liability Company name must contain the words "Limited Liability Company" or the abbreviation "LLC" or "L.L.C.")

2. The name and complete address of the Limited Liability Company's initial registered agent and office located in the state of Tennessee is:

David L. Maxey

(Name)

3270 Prince George ST

(Street address)

Memphis

(City)

TN 38115

(State/Zip Code)

Shelby

(County)

3. The Limited Liability Company will be: (NOTE: PLEASE MARK APPLICABLE BOX)

☐ Member Managed

☐ Manager Managed

☒ Director Managed

4. Number of Members at the date of filing, if more than six (6): _____

5. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date and time is: (Not to exceed 90 days)

Date: _____ Time: _____

6. The complete address of the Limited Liability Company's principal executive office is:

3270 Prince George ST

(Street Address)

Memphis

(City)

TN/Shelby/38115

(State/County/Zip Code)

7. Period of Duration if not perpetual: _____

8. Other Provisions:

9. THIS COMPANY IS A NONPROFIT LIMITED LIABILITY COMPANY (Check if applicable) ☐

February 8, 2007

Signature Date

David L. Maxey
Signature

Signer's Capacity (if other than individual capacity)

David L. Maxey

Name (printed or typed)