

SPRINT

BEFORE THE TENNESSEE REGULATORY AUTHORITY  
November 7, 2000 Nashville, Tennessee

In Re: Atlas Communications, Ltd. )  
for Cancellation of Authority to Provide ) Docket No. 97-00244  
Resold Telecommunication ) Co. ID: 119806  
Services In Tennessee )

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ORDER GRANTING CANCELLATION OF  
AUTHORITY TO PROVIDE RESOLD TELECOMMUNICATION SERVICES

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This matter is before the Tennessee Regulatory Authority (hereafter "Authority") upon the request of **Atlas Communications, Ltd.** to cancel their authority to provide Resold Telecommunications services in Tennessee. This matter was considered by the Authority at a regularly scheduled Authority Conference held on November 7, 2000.


WHEREFORE, having considered the request of **Atlas Communications, Ltd.** to cancel their authority, the Authority finds that such a cancellation should be granted.

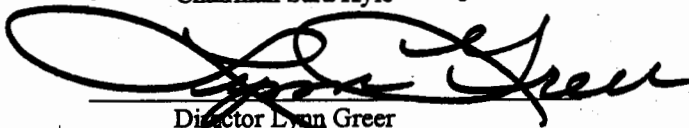
IT IS THEREFORE ORDERED:

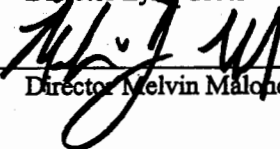
- 1) That the request of **Atlas Communications, Ltd.** to cancel their authority to provide Resold Telecommunication services in Tennessee, Docket No. 97-00244, is hereby granted; and
- 2) That this docket is herewith closed.

ATTEST:

  
K. David Waddell

  
Chairman Sara Kyle

  
Director Lynn Greer

  
Director Melvin Malone

**TENNESSEE PUBLIC SERVICE COMMISSION**

460 JAMES ROBERTSON PARKWAY  
NASHVILLE, TENNESSEE 37243-0505

KEITH BISSELL, CHAIRMAN  
STEVE HEWLETT, COMMISSIONER  
SARA KYLE, COMMISSIONER



Company ID: 00119806  
Atlas Communications, Ltd.  
482 Norristown Rd. Ste. 200  
Blue Bell, PA 19422

BEFORE THE TENNESSEE PUBLIC SERVICE COMMISSION  
Nashville, Tennessee February 29, 1996

IN RE: CASE NUMBER: 96-00132

Application for Authority for Operator Services and/or Resell Interexchange (Long Distance) Telecommunications Service and/or Telecommunications Operator Services in Tennessee Pursuant to Rule 1220-4-2-.57.




---ORDER---

This matter is before the Tennessee Public Service Commission upon the application of the above-mentioned company for certification as a long distance/interexchange reseller or telecommunication operator service provider in Tennessee. The Commission considered this application at its regularly scheduled Commission Conference held on February 20, 1996 and concluded that the applicant has met all the requirements for certification and should be authorized to provide the resell of interexchange telecommunications service and/or an operator service on an intrastate basis.

IT IS THEREFORE ORDERED:

1. That the above-mentioned company is issued a Certificate of Convenience and Necessity as an interexchange telecommunications reseller and/or an operator service provider for state-wide service in Tennessee as specified in its application on file with the Commission.
2. That said company shall comply with all applicable Commission rules and regulations.
3. That this order shall be retained as proof of certification with this Commission, and may be used to obtain appropriately tariffed access service and billing arrangements from Commission authorized telecommunications service providers.
4. That any party aggrieved with the Commission's decision in this matter may file a Petition for Reconsideration with the Commission within ten (10) days from and after the date of this Order.
5. That any Party aggrieved with the Commission's decision in this matter has the right of judicial review by filing a petition with the Tennessee Court of Appeals, Middle Section within sixty (60) days from and after the date of this Order.

  
Executive Director

  
Chairman  
  
Commissioner  
  
Commissioner



RECEIVED  
STATE OF TENNESSEE

95 OCT -6 PM 2:11

RILEY DARNELL  
SECRETARY OF STATE

RECEIVED  
STATE OF TENNESSEE

95 OCT 25 AM 10:25

RILEY DARNELL  
SECRETARY OF STATE

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

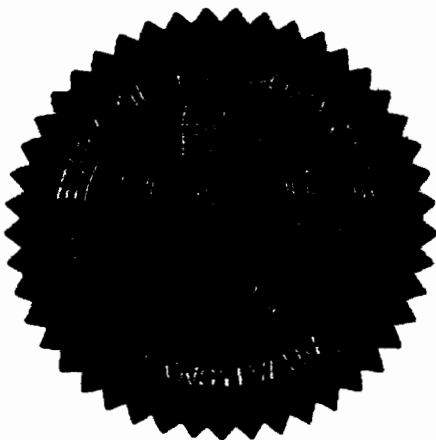
SEPTEMBER 22, 1995

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

ATLAS COMMUNICATIONS, LTD.

is duly incorporated under the laws of the Commonwealth of Pennsylvania  
and remains a subsisting corporation so far as the records of this office  
show, as of the date herein.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's  
Office to be affixed, the day  
and year above written.

A handwritten signature in cursive script, appearing to read "J.ette Kunkle".

Secretary of the Commonwealth

CFEN

# FILED

## APPLICATION FOR CERTIFICATE OF AUTHORITY FOR

RECEIVED  
STATE OF TENNESSEE

ATLAS COMMUNICATIONS, LTD.

RECEIVED  
STATE OF TENNESSEE

95 OCT 26 PM 2:11

95 OCT 25 AM 10:25

I, the Secretary of State of the State of Tennessee:

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 ATLAS COMMUNICATIONS, LTD.

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

ATLAS COMMUNICATIONS, LTD., INC.

[NOTE: 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 an assumed corporate name, an application must be filed pursuant to Section 48-14-101(d).]

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

3. The date of its incorporation is May 25, 1995 (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 482 Norristown Road,

Street	City	State/Country	Zip Code
Suite 200,	Blue Bell,	PA	19422

5. The complete street address (including the county and the zip code) of its registered office in this state is

Street	City/State	County	Zip Code
230 Fourth Avenue, North, 3rd Floor,	Nashville,	Davidson,	TN 37219

The name of its registered agent at that office is

Joseph Martin, Jr.

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

Frank G. Scardino,	<del>President</del> , Secretary, Treasurer,	482 Norristown Road, Suite 200 Blue Bell, PA 19422
John C. Fudesco	President	482 Norristown Rd Ste 200 Blue Bell, PA 19422

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

Frank G. Scardino,	Director	482 Norristown Road, Suite 200, Blue Bell, PA
Anne C. Scardino,	Director	482 Norristown Road, Suite 200, Blue Bell, PA

8. The corporation is a corporation for profit.

9. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date/time is

\_\_\_\_ ng

.19

(date)

(time)

**TENNESSEE PUBLIC SERVICE COMMISSION**  
460 JAMES ROBERTSON PARKWAY  
NASHVILLE, TENNESSEE 37243-0505

**KEITH BISSELL, CHAIRMAN**  
**STEVE HEWLETT, COMMISSIONER**  
**SARA KYLE, COMMISSIONER**  
**PAUL ALLEN, EXECUTIVE DIRECTOR**

**APPLICATION FOR CERTIFICATE  
TO PROVIDE OPERATOR SERVICES AND/OR  
RESELL INTEREXCHANGE  
TELECOMMUNICATION SERVICES IN TENNESSEE  
[RULE 1220-4-2-.57]**

**SECTION A**

**PART 1: General Information**

**A. Name of Applicant** Atlas Communications, Ltd.  
**Address** 482 Norristown Road, Suite 200  
**State** PA **Zip Code** 19422 **Phone No.** (610) 940-9040

**B. Corporate Officers:**

John Fudesco - President  
Scott McBride, Jr. - Vice President of Marketing  
Neil D. Sollinger - Vice President of Sales  
Frank G. Scardino - Secretary/Treasurer

**C. Name and telephone number of Tennessee Contact Person authorized to respond to Commission inquiries Monday through Friday.**

*P. Crocker*

Patrick D. Crocker  
EARLY, LENNON, PETERS & CROCKER, P.C.  
900 Comerica Building  
Kalamazoo, MI 49007-4752  
(616) 381-8844

**D. List a toll-free telephone number that consumers can call to report service problems and/or request refunds or adjustments.**

1-800-883-8775

(To be filled out by PSC) Company ID Number \_\_\_\_\_

Date Approved \_\_\_\_\_

Evaluator \_\_\_\_\_

EXECUTIVE DIRECTOR  
OFFICE OF THE  
1/19/96  
96 JAN 23 PM 1 45  
REC'D TN. PUBLIC  
SERVICE COMM.

**E. Check the type of telecommunication services you plan to provide in Tennessee.**

☒ Resell Interexchange long distance services

☐ Operator Services

☐ Other (describe below) \_\_\_\_\_

**F. 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.**

Not Applicable

**G. List the state(s) you are authorized to operate in at this time.**

Please see Exhibit A.

**H. List any states that you have been denied authority to provide service.**

Applicant has not been denied authority to operate in any state.

**I. Areas in Tennessee to be served.**

Applicant will provide service in all equal access areas within Tennessee.

**J. What type of customers will the company serve?**

a. Business ☒

b. Residential ☒

c. Aggregators ☐

(e.g. Hotels, Payphones)

d. Other (specify) \_\_\_\_\_

**K. Do you allow a property imposed fee (PIF) to be added to the price of intrastate telephone calls over your network? If yes, specify amount.**

Not Applicable

**L. Are your prices for intrastate services plus and PIF equal to or less than the dominant carriers price for similar services?**

Not Applicable

**M. Describe the type of services and prices that Applicant will be offering in Tennessee on the International Tariff found in Appendix II.**

**N. What is the applicant's 10XXX or 800 access code?**

Applicant utilizes the carrier identification code of the underlying network provider Sprint.

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

No.

**P. What facility-based network will the applicant be reselling?**

Applicant will utilize the underlying networks provided by Sprint.

**Q. Will the applicant be utilizing the local telephone company's billing system or billing customers direct?**

Applicant will bill customers directly.

**R. Describe briefly how the applicant plans to market their service in Tennessee? If an independent telemarketer is going to be used state company name and address.**

Applicant will market services through independent agents.

**S. Describe the procedures the applicant will use to switch a consumer's preferred interexchange service.**

Applicant will confirm the order to change long distance services by following one of the four confirmation procedures followed by the FCC.

**T. 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

**U. Applicant gives permission to the local telephone company to provide the Commission 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

**PART II: Organization Structure**

**A. Type of Organization**

Individual \_\_\_\_\_ Corporation  X

Partnership \_\_\_\_\_ Other (Explain on separate sheet) \_\_\_\_\_

**B. (1) Attach a copy of Articles of Incorporation and current by-laws.**

Please see Exhibit B.

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

Please see Exhibit C.

**PART III: Financial Information**

Applicant attaches a copy of its most recent financial statements as Exhibit D.

**PART IV: Display Card**

**Attach a copy of the display card to be placed on the aggregators telephone which shows what operator services are to be provided. The card must contain all required information listed in the attached Rule (1220-4-2-.57,B), which includes a toll-free number consumers can call for service problems and refunds.**

**Not Applicable**

**PART V: Rule Compliance Agreement**

**A. The Interexchange reseller or Operator Service Provider applicant, hereby, affirms the following:**

- **Has received, read, and understands the Tennessee Public Service Commission's (TPSC) Interexchange Reseller Rules and Regulations, (Appendix III)**
- **Understands the penalties for non-compliance and all associated fees to provide such service.**



- Will comply with the TPSC Interexchange Reseller Rules and all other applicable Commission Rules and state laws, including T.C.A. Section 65-5-206 (Appendix IV).
- That all information provided in the attached registration document is true to the best of my knowledge.

Date

\_\_\_\_\_  
Atlas Communications, Ltd.

\_\_\_\_\_  
Patrick D. Crocker  
Attorney for Atlas Communications, Ltd.

Subscribed and sworn before me this 22nd day  
of January, 1996

Lisa L. Cooper  
Notary Public  
Lisa L. Cooper  
Kalamazoo County, Michigan  
My Commission Expires: 4/16/2000

**Secretary of State****Corporations Section**

James K. Polk Building, Suite 1800

Nashville, Tennessee 37243-0306

DATE: 10/25/95  
REQUEST NUMBER: 3069-1302  
TELEPHONE CONTACT: (615) 741-0537  
FILE DATE/TIME: 10/25/95 1025  
EFFECTIVE DATE/TIME: 10/25/95 1025  
CONTROL NUMBER: 0302075

TO:  
CORPORATION GUARANTEE & TRUST COMPANY  
701 ARCHITECTS BLDG  
117 S 17TH ST  
PHILADELPHIA, PA 19103-5090

RE:  
ATLAS COMMUNICATIONS, LTD., 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: 10/06/95

FROM:  
CORPORATION GUARANTEE & TRUST CO  
117 S. 17TH ST  
SUITE 701  
PHILADELPHIA, PA 19103-0000

	FEE	
RECEIVED:	\$300.00	\$300.00
TOTAL PAYMENT RECEIVED:		\$600.00

RECEIPT NUMBER: 00001857184  
ACCOUNT NUMBER: 00073224



*Riley C. Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE

## APPLICATION FOR CERTIFICATE OF AUTHORITY FOR

FILED

RECEIVED  
STATE OF TENNESSEE

ATLAS COMMUNICATIONS, LTD.

RECEIVED  
STATE OF TENNESSEE

95 OCT 26 PM 2:11

95 OCT 25 AM 10:25

To the Secretary of State of the State of Tennessee:

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 ATLAS COMMUNICATIONS, LTD.

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

ATLAS COMMUNICATIONS, LTD., INC.

[NOTE: 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 an assumed corporate name, an application must be filed pursuant to Section 48-14-101(d).]

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

3. The date of its incorporation is May 25, 1995 (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 482 Norristown Road,

<u>Suite 200,</u>	<u>Blue Bell,</u>	<u>PA</u>	<u>19422</u>
Street	City	State/Country	Zip Code

5. The complete street address (including the county and the zip code) of its registered office in this state is

<u>230 Fourth Avenue, North, 3rd Floor,</u>	<u>Nashville,</u>	<u>Davidson,</u>	<u>TN 37219</u>
Street	City/State	County	Zip Code

The name of its registered agent at that office is

Joseph Martin, Jr.

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

<u>Frank G. Scardino,</u>	<u>Secretary, Treasurer,</u>	<u>482 Norristown Road, Suite 200</u>
		<u>Blue Bell, PA 19422</u>
<u>John C. Fudesco</u>	<u>President</u>	<u>482 Norristown Rd Ste 200</u>
		<u>Blue Bell, PA 19422</u>

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

<u>Frank G. Scardino,</u>	<u>Director</u>	<u>482 Norristown Road, Suite 200, Blue Bell, PA</u>
<u>Anne C. Scardino,</u>	<u>Director</u>	<u>482 Norristown Road, Suite 200, Blue Bell, PA</u>

8. The corporation is a corporation for profit.

9. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date/time is

n.g

(date).

(time).

(time).

9534-1574

Microfilm Number \_\_\_\_\_

Filed with the Department of State on \_\_\_\_\_

MAY 25 1995

Entity Number 2639165Secretary of the Commonwealth 11ARTICLES OF INCORPORATION  
DSCB:15-1306(Rev 89)

Indicate type of domestic corporation (check one):

☒ Business-stock (15 Pa. C.S. § 1306)☐ Professional (15 Pa. C.S. § 2903)☐ Business-nonstock (15 Pa. C.S. § 2102)☐ Management (15 Pa. C.S. § 2701)☐ Business-statutory close (15 Pa. C.S. § 2304a is applicable)☐ Cooperative (15 Pa. C.S. § 7701)1. The name of the corporation is: ATLAS COMMUNICATIONS, LTD.

This corporation is incorporated under the provisions of the Business Corporation Law of 1988.

2. The (a) address of this corporation's initial registered office in this Commonwealth or (b) commercial registered office provider and the county of venue is:

(a) <u>7837 OLD YORK RD.</u>	<u>ELKINS PARK</u>	<u>PA</u>	<u>19027</u>	<u>MONTGOMERY</u>
Number and Street	City	State	Zip	County

(b) <u>N/A</u>	
Name of Commercial Registered Office Provider	County

For a corporation represented by a commercial registered office provider, the county in (b) shall be deemed the county in which the corporation is located for venue and official publication purposes.

3. The aggregate number of shares authorized is: 10,000 (other provisions, if any, attach 8 1/2 x 11 sheet)

4. The name and address, including street and number, if any, of each incorporator is:

Name	Address	Signature	Date
<u>STEVEN M. ZELITCH</u>	<u>7837 OLD YORK RD. ELKINS PARK, PA 19027</u>	<u>[Signature]</u>	<u>5/22/95</u>

5. The specified effective date, if any, is: N/A  
month day year hour, if any

6. Any additional provisions of the articles, if any, attach an 8 1/2 x 11 sheet.



PA DEPT. OF STATE

MAY 25 1995

Microfilm Number \_\_\_\_\_

Filed with the Department of State on JUN 19 1995

Entity Number 2639165

Secretary of the Commonwealth

## ARTICLES OF AMENDMENT-DOMESTIC BUSINESS CORPORATION

CSCC:15-1915 (Rev 91)

In compliance with the requirements of 15 Pa.C.S. § 1915 (relating to articles of amendment), the undersigned business corporation, desiring to amend its Articles, hereby states that:

1. The name of the corporation is: ATLAS COMMUNICATIONS, LTD.

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) 7837 Old York Road Elkins Park PA 19027 Montgomery  
 Number and Street City State Zip County

Number and Street

Civ

**Size**

2.

Судья

(t) e/c:

Name of Commercial Registered Child Provider

Country

For a corporation represented by a commercial registered office provider, the county in (b) shall be deemed the county in which the corporation is located for venue and official publication purposes.

3. The statute by or under which it was incorporated is: Business Corporation Law of 1988

4. The date of its incorporation is: May 25, 1995

3. (Check, and if appropriate complete, one of the following):

**XX** The amendment shall be effective upon filing these Articles of Amendment in the Department of State.

\_\_\_\_\_ The amendment shall be effective on: \_\_\_\_\_ at \_\_\_\_\_  
Date Hour

Date \_\_\_\_\_

Hour

6. (Check one of the following):

yy The amendment was adopted by the shareholders (or members) pursuant to 15 Pa.C.S. § 1914(a) and (b).

The amendment was adopted by the board of directors pursuant to 15 P.S. § 1514(c).

7. (Check, and if appropriate complete, one of the following):

The amendment adopted by the corporation, set forth in full, is as follows:

XX The amendment adopted by the corporation is set forth in full in Exhibit A attached hereto and made a part hereof.

PA DEPT. OF STATE

JUN 1 9 1995

9540-1210

DSC3:15-1915 (Rev 91)-2

8. (Check if the amendment restates the Articles):

☐ The restated Articles of Incorporation supersede the original Articles and all amendments thereto.

IN TESTIMONY WHEREOF, the undersigned corporation has caused these Articles of Amendment to be signed by a duly authorized officer thereof this 14 day of June, 1995

ATLAS COMMUNICATIONS, LTD.

(Name of Corporation)

BY: 

(Signature)

title: President

## EXHIBIT A

RESOLVED, That the Articles of Incorporation of this corporation be amended by changing Article 3 thereof so that, as amended, said Article 3 shall be and read as follows:

3. The aggregate number of shares authorized is Ten Thousand (10,000). The authorized shares shall be divided into One Thousand (1,000) shares of Class A common stock, no par value, and Nine Thousand (9,000) shares of Class B common stock, no par value. Class A common stock and Class B common stock shall have identical rights and powers, except that Class B common stock shall have no voting rights on any matter whatsoever, including the election of directors.

JUN 30 1995

Microfilm Number \_\_\_\_\_

Filed with the Department of State on \_\_\_\_\_

Entity Number 2639165


Secretary of the Commonwealth

## STATEMENT OF CHANGE OF REGISTERED OFFICE

DSC3:15-1507/4144/5307/6144/8506 (Rev 90)

Indicate type of entity (check one):

☒ Domestic Business Corporation (15 Pa.C.S. § 1507)☐ Foreign Nonprofit Corporation (15 Pa.C.S. § 6144)☐ Foreign Business Corporation (15 Pa.C.S. § 4144)☐ Domestic Limited Partnership (15 Pa.C.S. § 3506)☐ Domestic Nonprofit Corporation (15 Pa.C.S. § 5507)

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. (relating to corporations and unincorporated associations) the undersigned corporation or limited partnership, desiring to effect a change of registered office, hereby states that:

1. The name of the corporation or limited partnership is: ATLAS COMMUNICATIONS, LTD.

2. The (a) address of this corporation's or limited partnership's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is: (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a)	<u>7837 Old York Road</u>	<u>Elkins Park</u>	<u>PA</u>	<u>19027</u>	<u>Montgomery</u>
	Number and Street	City	State	Zip	County

(b) c/o:	_____	_____
	Name of Commercial Registered Office Provider	County

For a corporation or a limited partnership represented by a commercial registered office provider, the county in (b) shall be deemed the county in which the corporation or limited partnership is located for venue and official publication purposes.

3. (Complete part (a) or (b)):

(a) The address to which the registered office of the corporation or limited partnership in this Commonwealth is to be changed is:

<u>482 Norristown Road, Suite 200</u>	<u>Blue Bell</u>	<u>PA</u>	<u>19422</u>	<u>Montgomery</u>
Number and Street	City	State	Zip	County

(b) The registered office of the corporation or limited partnership shall be provided by:

c/o:	_____	_____
	Name of Commercial Registered Office Provider	County

For a corporation or a limited partnership represented by a commercial registered office provider, the county in (b) shall be deemed the county in which the corporation or limited partnership is located for venue and official publication purposes.

PA DEPT. OF STATE

JUN 30 1995



DSC3:15-1507/4144/5507/6144/8506 (Rev 90)-2

4. (Strike out if a limited partnership): Such change was authorized by the Board of Directors of the corporation.

IN TESTIMONY WHEREOF, the undersigned corporation or limited partnership has caused this statement to be signed by a duly authorized officer this 25 day of June, 1995

ATLAS COMMUNICATIONS, LTD.Name of Corporation/Limited PartnershipBY: 

(Signature)

TITLE: PRESIDENT