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January 19, 1999

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**VIA FEDERAL EXPRESS**

**RECEIVED  
ADMINISTRATIVE**

JAN 20 1999

TN REGULATORY AUTHORITY

Mr. Scott Trout  
Tennessee Regulatory Authority  
460 James Robertson Parkway  
Nashville, TN 37219-5477

Re: Access One, Inc.  
Application for Certificate to Resell Telecommunication Services

JK

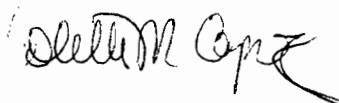
Dear Mr. Trout:

Transmitted on behalf of our client, Access One, Inc., are an original and two copies of its Application for Certificate to Resell Telecommunication Services in the State of Tennessee. This application includes a copy of Access One, Inc.'s proposed Tariff.

Also enclosed is a check made payable to the Tennessee Regulatory Authority in the amount of \$50.00 to cover the requisite filing fee.

Please date-stamp the "Receipt" copy of this filing and return it in the enclosed, self-addressed, stamped envelope. If you have any questions regarding this matter, please contact either of the undersigned.

Respectfully submitted,



Glenn S. Richards  
Colette M. Capretz

Enclosure  
GSR/CMC:jch  
J:\DATA\CLIENT\60\6034\6034000L.TN

VOUCHER NO. 277-116159  
C# 1570 SRC. 281.03  
AMT. REC. 50.00  
DEPOSIT DATE 1/21/99

# TENNESSEE REGULATORY AUTHORITY

Lynn Greer, Chairman  
Sara Kyle, Director  
Melvin Malone, Director

460 James Robertson Parkway  
Nashville, Tennessee 37243-0505

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

### SECTION A

#### Part I: General Information

A. Name of Applicant: Access One, Inc.  
Address: 125 North Halsted Street, 4th Floor  
City, State, Zip Code: Chicago, Illinois 60661  
Phone No.: (312) 441-1000

B. Owners, Partners, or Corporate Officers:

NAME	ADDRESS	CITY	STATE	ZIP CODE
Mark A. Jozwiak, Chief Executive Officer	2836 N. Southport Avenue, #A	Chicago	IL	60656
Lance C. Honea, President, Secretary	2620 North Clybourn Avenue, #103	Chicago	IL	60614
Brian K. Barkley, Treasurer	2520 North Ashland Avenue	Chicago	IL	60614

C. Name and telephone number of contact person authorized to respond to Authority inquiries Monday through Friday.

Name: Mark A. Jozwiak  
Telephone: (312) 441-1000  
Facsimile: (312) 441-1010

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

1-(800)-804-8333

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

☒ Resell Interexchange Long Distance Services  
☐ Resell Local Exchange 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**.

N/A

(To be filled out by TRA)

Company ID Number \_\_\_\_\_

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

Evaluator \_\_\_\_\_

128296  
99-0003

## Part II: Organization Structure

### A. Type of Organization

- ☐ Individual  
☒ Corporation  
☐ Partnership  
☐ Other (Explain on separate sheet)

### B. If partnership and/or Non-resident:

- (1) Attach a copy of Articles of Incorporation and current By-Laws.

**See Exhibit B attached hereto.**

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

**See Exhibit C attached hereto.**

## Part III: Financial Information

- A. Attach a current financial statement showing 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.

**See Exhibit D attached hereto.**

## Part IV: Display Card

- A. 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),<sup>3</sup> which includes a toll-free number consumers can call for service problems and refunds.

N/A

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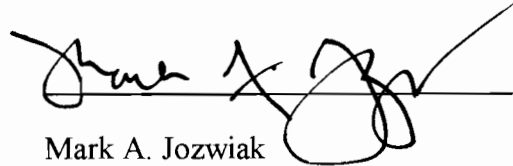
<sup>3</sup>It is the responsibility of the reseller or operator service provider to assure that the appropriate display card is affixed to the aggregates telephones.

Part V: Rule Compliance Agreement

A. The Interexchange Reseller or Operator Service Provider applicant, hereby, affirms that:

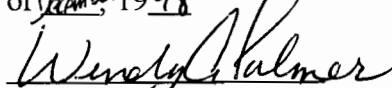
- it has received, read, and understands the Tennessee Regulatory Authority (TRA, formerly TPSC) Interexchange Reseller Rules and Regulations, (Appendix III)
- it understands the penalties for non-compliance, and all associated fees to provide such service.
- it will comply with the TRA Interexchange Reseller Rules and all other applicable Authority Rules and state laws, including T.C.A. Section 65-5-206 (Appendix IV).
- all information provided in the attached registration document is true to the best of its knowledge.

Access One, Inc.

  
 Mark A. Jozwiak CEO

Dated: 12-31-98

Subscribed and sworn  
 before me this 31<sup>st</sup> Day  
 of December, 1998

  
 Notary Public



Seal

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

Applicant is authorized, on a certification, registration, or non-registration basis, to provide service in the following states: California, Colorado, Washington, D.C., Illinois, Indiana, Iowa, Michigan, Montana, Nevada, New Jersey, Texas, Utah, and Virginia. Applicant either has or soon will have applications, registration statements, or tariffs on file with the following states: Arizona, Arkansas, Florida, Georgia, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, New York, North Carolina, North Dakota, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Washington, Wisconsin, and Wyoming. No state has denied Applicant authority to provide telecommunications service.

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

None

- I. Areas in Tennessee to be served.

Applicant seeks authority to provide resold intraLATA and interLATA inter-exchange services throughout the State of Tennessee.

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

☒ Business  
☐ Residential  
☐ Aggregators (e.g. Hotels, Payphones)  
☐ Other (specify below)

- 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.

N/A

- L. Are your prices for intrastate services plus any PIF equal to or less than the dominant carrier's price for similar services?

Yes

- M. 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>

**See Appendix II attached hereto.**

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

N/A

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

No

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<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.

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

IXC Communications Group and Frontier Communications

Q. Will the applicant be utilizing the local telephone company's billing system or billing customer direct?<sup>2</sup>

Applicant will outsource its billing to VLM Consulting, Inc., 1106 Lincolnway West, P.O. Box 209, Osceola, Indiana 46561-0201. A copy of a sample bill is attached hereto as **Exhibit A.**

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

Applicant will not engage in multi-level marketing. Applicant intends to market its services to business customers. Applicant will sell its services through a variety of methods, including a dedicated, in-house sales force and independent sales agents. Applicant is unable to provide the Authority with said agents' names at this time, but will do so prior to providing service.

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

Applicant will comply with all FCC rules concerning changing a consumer's long distance carrier.

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

U. 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 carriers' tariffed rates.

Yes

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

**Appendix I**  
**Contact Persons for Reseller Carriers Served in Tennessee**

<b>Reseller Name</b>	<b>Address</b>	<b>Contact</b>
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N/A

**Appendix II  
Informational Tariff Sheet**

<b>Carrier's<sup>4</sup> Description of Service service</b>	<b>Applicant proposed Price change to consumer</b>	<b>Dominant Price for similar</b>
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See Attached Tariff.

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<sup>4</sup>Dominant Carrier (South Central Bell or AT&T, whichever is appropriate). A copy of these companies' rates are found on Appendix V.





## EXHIBIT LIST

Exhibit A	Sample Bill
Exhibit B	Articles of Incorporation and By-Laws
Exhibit C	Certification of Authority to Engage in Business in Tennessee
Exhibit D	Financial Statements

**EXHIBIT A**

**Sample Bill**



Customer Service Number:	Billing Summary Descriptions	Amount
1-877-ACCESSONE (222-3776)	Previous Balance	\$75.36
	Long Distance and Other Outbound Charges	\$19.40
	800 Inbound Charges	\$28.75
	Travel Card Charges	\$41.61
	Local Charges	\$218.37
	Federal Excise Tax	\$12.05
	Universal Service Fund	\$0.42
	State Tax	\$24.16
	Local Tax	\$2.10
	<b>Total Due</b>	<b>\$422.22</b>

Billing Summary for:

Lost Energy Systems, Inc.

Account Number: 960310132-24

Invoice Date: April 28, 1998

Due Date: May 13, 1998

Amount Due: \$422.22

▽ PLEASE DETACH AND RETURN BOTTOM PORTION WITH PAYMENT ▽

Access One, Inc.  
125 N. Halsted St.  
Chicago, IL 60661

Account Number: 960310132-24  
Invoice Date: April 28, 1998  
Due Date: May 13, 1998  
Amount Due: \$422.22

Amount Enclosed:

Lost Energy Systems, Inc.  
9615 South 88th. Street  
Birmingham, AL 35233

PLEASE MAKE CHECKS PAYABLE TO:

— Access One, Inc.  
— Department 77-6842  
— Chicago, IL 60678-6842  
—

## \*\*\* A PERSONAL NOTE \*\*\*

Your new pagers have been turned on. Thank you!

## TAX AND SURCHARGE REPORT

	QTY	RATE	AMOUNT
Federal USF			0.11
Federal Interstate USF			0.31
Federal Excise Tax			12.05
State Sales Tax			0.04
State Utility Users Tax			24.12
LOCAL ACCESS TAXES			
County 911 Emergency System	7	0.30	2.10
<b>Total</b>			<b>38.73</b>

## USAGE BY PROJECT ACCOUNTING CODE (PAC)

PROJECT	CALLS	MINUTES	COST
11 Humpty Dumpty	13	18.9	4.08
12 Mary Mary	15	46.8	6.50
13 Jack Horner	3	2.3	0.33
14 Wee Willie Winkie	6	15.5	2.27
15 Peter Cottontail	8	39.4	6.22
<b>Total Due</b>	<b>45</b>	<b>122.9</b>	<b>19.40</b>

## TOTAL USAGE BY LINE (OUTBOUND)

LINE	CALLS	MINUTES	COST
205 334-5349	19	25.0	5.10
205 340-1110	26	97.9	14.30
<b>Total Due</b>	<b>45</b>	<b>122.9</b>	<b>19.40</b>

## TEN MOST FREQUENTLY CALLED AREA CODES (OUTBOUND)

AREA CODE	% CALLS	CALLS	MINUTES	COST
414	22.22%	10	63.1	8.76
404	20.00%	9	8.7	2.68
904	15.56%	7	7.6	1.05
334	8.89%	4	5.1	0.71
504	6.67%	3	8.9	1.32
714	6.67%	3	2.2	0.32
901	4.44%	2	2.0	0.30
312	2.22%	1	1.0	0.85
410	2.22%	1	1.0	0.15
510	2.22%	1	3.3	0.46
OTHER	8.89%	4	20.0	2.80

## TEN MOST FREQUENTLY CALLED NUMBERS (OUTBOUND)

NUMBER	LOCATION	CALLS	MINUTES	COST
414 556-4811	Waukesha WI	9	62.8	8.72
904 246-7252	Pnamacybch FL	4	4.8	0.66
404 356-8175	Atlanta GA	3	2.4	0.35
714 736-5162	Irvine CA	3	2.2	0.32
334 490-1104	Mobile AL	2	2.0	0.28
404 358-6239	Atlanta GA	2	1.6	0.23
404 567-1212	Dir Asst GA	2	2.0	1.70
901 807-7130	Memphis TN	2	2.0	0.30
904 908-3641	Panamacity FL	2	2.5	0.35
312 567-1212	Dir Asst IL	1	1.0	0.85

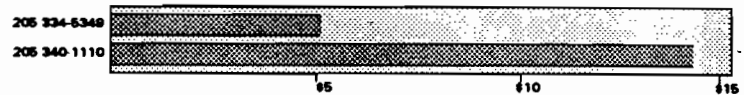
## TEN MOST EXPENSIVE CALLS (OUTBOUND)

DATE	NUMBER	LOCATION	MINUTES	COST
09/26	414 556-4811	Waukesha WI	17.3	2.40
10/10	414 556-4811	Waukesha WI	16.7	2.32
10/09	617 950-9100	Woburn MA	16.5	2.29
10/01	414 556-4811	Waukesha WI	9.1	1.26
10/11	504 936-6495	Batonrouge LA	7.7	1.15
10/01	414 556-4811	Waukesha WI	6.4	0.89
10/09	312 567-1212	Dir Asst IL	1.0	0.85
10/04	404 567-1212	Dir Asst GA	1.0	0.85
10/04	404 567-1212	Dir Asst GA	1.0	0.85
10/01	414 556-4811	Waukesha WI	4.6	0.64

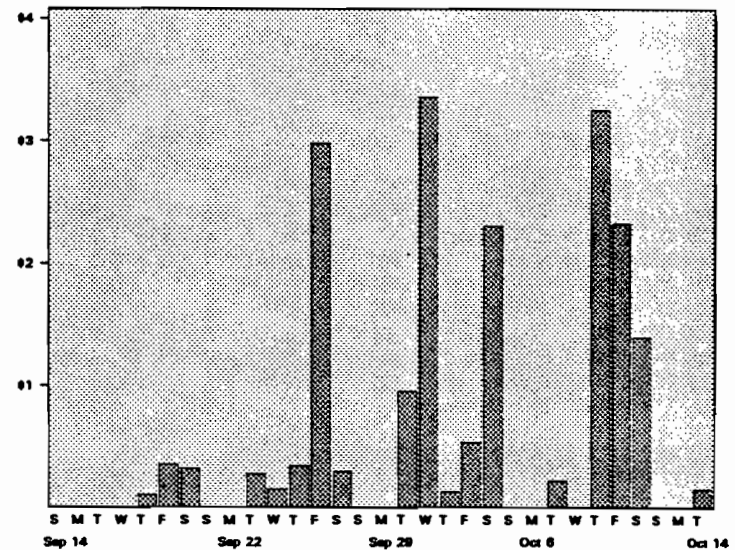
## TEN LONGEST DURATION CALLS (OUTBOUND)

DATE	NUMBER	LOCATION	MINUTES	COST
09/26	414 556-4811	Waukesha WI	17.3	2.40
10/10	414 556-4811	Waukesha WI	16.7	2.32
10/09	617 950-9100	Woburn MA	16.5	2.29
10/01	414 556-4811	Waukesha WI	9.1	1.26
10/11	504 936-6495	Batonrouge LA	7.7	1.15
10/01	414 556-4811	Waukesha WI	6.4	0.89
10/01	414 556-4811	Waukesha WI	4.6	0.64
10/01	414 556-4811	Waukesha WI	3.5	0.49
10/03	510 614-7020	Concord CA	3.3	0.46
10/04	414 556-4811	Waukesha WI	3.2	0.44

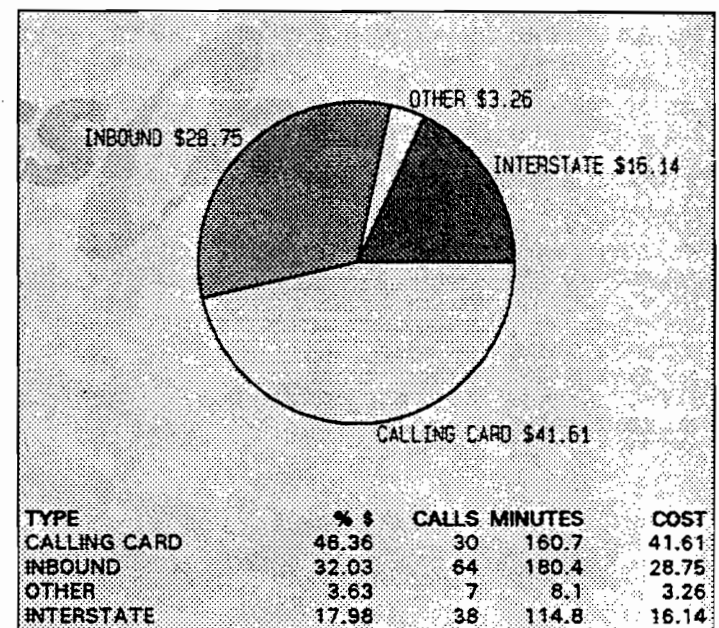
## OUTBOUND USAGE BY LINE



## OUTBOUND DAILY CALL SUMMARY 09/14/1997 to 10/14/1997



## TOTAL MONTHLY USAGE (\$) BY CALL TYPE



## TOTAL USAGE BY LINE (INBOUND)

LINE	CALLS	MINUTES	COST
800 815-7592	64	180.4	28.75
<b>Total Due</b>	<b>64</b>	<b>180.4</b>	<b>28.75</b>

## INBOUND USAGE BY POINT OF TERMINATION

NUMBER	POT	CALLS	MINUTES	COST
800 815-7592	205 246-3452	64	180.4	28.75

ACCOUNT NUMBER: 960310132-24

INVOICE DATE: 04/28/1998

ITEM	DATE	TIME	NUMBER	LOCATION	MIN	COST
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MAIN BILLING NUMBER: 205 340-1110  
ACCOUNT CODE: 11 Humpty Dumpty

**CALLS FROM LINE: 205 334-5349**

1	09/18	02:57P	404 358-6239	Atlanta	GA	0.7	0.10
2	09/19	02:25P	410 398-7013	Westminstr	MD	1.0	0.15
3	09/20	02:05P	714 736-5162	Irvine	CA	0.3	0.04
4	09/20	02:07P	714 736-5162	Irvine	CA	1.0	0.15
5	10/02	04:12P	404 358-6239	Atlanta	GA	0.9	0.13
6	10/04	11:51A	404 567-1212	Dir Asst	GA	1.0	0.85
7	10/04	12:28P	404 886-1993	Atlanta	GA	1.1	0.16
8	10/04	12:52P	404 567-1212	Dir Asst	GA	1.0	0.85

**CALLS FROM LINE: 205 340-1110**

9	09/23	04:40P	904 246-7252	Pnamacybch	FL	0.3	0.04
10	10/01	09:47A	414 556-4811	Waukesha	WI	4.6	0.64
11	10/03	11:11A	510 614-7020	Concord	CA	3.3	0.46
12	10/03	01:28P	602 597-1065	Paradisvly	AZ	0.5	0.07
13	10/04	08:49A	414 556-4811	Waukesha	WI	3.2	0.44

TOTAL FOR ACCOUNT: 11 Humpty Dumpty \$4.08

ACCOUNT CODE: 12 Mary Mary

**CALLS FROM LINE: 205 340-1110**

14	09/23	04:41P	904 908-3641	Panamacity	FL	0.4	0.06
15	09/25	09:35A	904 246-7252	Pnamacybch	FL	1.1	0.15
16	09/25	10:14A	904 886-3873	Panamacity	FL	0.3	0.04
17	09/25	10:22A	334 490-1104	Mobile	AL	1.1	0.15
18	09/26	08:48A	334 695-6156	Marion	AL	1.5	0.21
19	09/26	10:25A	414 556-4811	Waukesha	WI	17.3	2.40
20	09/26	11:13A	334 490-1104	Mobile	AL	0.9	0.13
21	09/26	11:34A	414 556-4811	Waukesha	WI	1.7	0.24
22	09/27	08:58A	904 908-3641	Panamacity	FL	2.1	0.29
23	09/30	03:01P	904 246-7252	Pnamacybch	FL	0.8	0.11
24	10/01	07:57A	414 556-4811	Waukesha	WI	0.3	0.04
25	10/01	08:46A	414 556-4811	Waukesha	WI	6.4	0.89
26	10/01	09:08A	414 556-4811	Waukesha	WI	9.1	1.26
27	10/01	09:26A	414 556-5411	Waukesha	WI	0.3	0.04
28	10/01	09:32A	414 556-4811	Waukesha	WI	3.5	0.49

TOTAL FOR ACCOUNT: 12 Mary Mary \$6.50

ACCOUNT CODE: 13 Jack Horner

**CALLS FROM LINE: 205 334-5349**

29	09/19	02:50P	404 356-8175	Atlanta	GA	0.5	0.07
30	09/19	02:51P	404 356-8175	Atlanta	GA	0.9	0.13
31	09/20	02:04P	714 736-5162	Irvine	CA	0.9	0.13

TOTAL FOR ACCOUNT: 13 Jack Horner \$0.33

ACCOUNT CODE: 14 Wee Willie Winkie

**CALLS FROM LINE: 205 334-5349**

32	09/30	03:05P	901 807-7130	Memphis	TN	1.0	0.15
33	10/11	10:19A	404 261-6400	Atlanta	GA	1.6	0.24
34	10/11	06:43P	504 936-6495	Batonrouge	LA	7.7	1.15
35	10/14	02:56P	901 807-7130	Memphis	TN	1.0	0.15

**CALLS FROM LINE: 205 340-1110**

36	09/30	03:02P	904 246-7252	Pnamacybch	FL	2.6	0.36
37	10/07	03:28P	334 682-2461	Troy	AL	1.6	0.22

TOTAL FOR ACCOUNT: 14 Wee Willie Winkie \$2.27

ACCOUNT CODE: 15 Peter Cottontail

**CALLS FROM LINE: 205 334-5349**

38	09/23	06:59P	504 284-6495	Batonrouge	LA	0.3	0.04
39	09/23	06:59P	504 699-6516	Plaquemine	LA	0.9	0.13
40	09/24	01:45P	404 356-8175	Atlanta	GA	1.0	0.15
41	09/30	12:04P	912 542-7373	Jesup	GA	2.2	0.33

**CALLS FROM LINE: 205 340-1110**

42	10/09	07:54A	312 567-1212	Dir Asst	IL	1.0	0.85
43	10/09	07:55A	847 659-0124	Skokie	IL	0.8	0.11
44	10/09	01:37P	617 950-9100	Woburn	MA	16.5	2.29
45	10/10	09:36A	414 556-4811	Waukesha	WI	16.7	2.32

TOTAL FOR ACCOUNT: 15 Peter Cottontail \$6.22

TOTAL FOR BILLING NUMBER: 205 340-1110 \$19.40

ITEM	DATE	TIME	NUMBER	LOCATION	MIN	COST
------	------	------	--------	----------	-----	------

CALLS TO: 800 815-75

46	09/18	10:23A	719 608-9342	Colordosp	CO	0.3	0.05
47	09/18	10:25A	719 608-9342	Colordosp	CO	0.3	0.05
48	09/18	12:24P	914 807-5584	Milton	NY	0.3	0.05
49	09/18	04:09P	334 869-2456	Kowaliga	AL	0.4	0.06
50	09/18	08:03P	205 863-6151	Huntsville	AL	0.8	0.13
51	09/19	04:11P	910 750-3512	Lumberton	NC	0.6	0.10
52	09/20	10:51A	205 891-9864	Birmingham	AL	0.7	0.11
53	09/20	11:59A	334 274-0100	Montgomery	AL	0.5	0.08
54	09/20	04:25P	205 336-1825	Birmingham	AL	0.3	0.05
55	09/22	03:19P	918 801-2865	Chelsea	OK	0.4	0.06
56	09/23	05:18P	334 274-3279	Montgomery	AL	1.0	0.16
57	09/23	08:03P	334 274-3279	Montgomery	AL	1.1	0.17
58	09/24	01:17P	205 891-9864	Birmingham	AL	0.9	0.14
59	09/24	08:56P	205 979-8465	Birmingham	AL	16.5	2.62
60	09/25	02:13P	205 891-9864	Birmingham	AL	0.3	0.05
61	09/25	08:09P	205 982-1051	Birmingham	AL	11.5	1.83
62	09/26	02:19A	815 957-7586	Chenoa	IL	0.3	0.05
63	09/26	08:17A	910 640-9911	Fairmont	NC	0.3	0.05
64	09/26	03:11P	205 979-0316	Birmingham	AL	0.3	0.05
65	09/27	09:21A	205 111-8919	Birmingham	AL	0.8	0.13
66	09/30	06:41P	205 764-6896	Tuscaloosa	AL	0.3	0.05
67	10/01	03:34P	205 764-6896	Tuscaloosa	AL	0.3	0.05
68	10/01	06:46P	205 764-6896	Tuscaloosa	AL	0.3	0.05
69	10/01	08:42P	205 764-6896	Tuscaloosa	AL	3.7	0.59
70	10/02	07:26A	334 579-4837	Wetumpka	AL	0.5	0.08
71	10/02	08:00P	205 764-6896	Tuscaloosa	AL	5.5	0.87
72	10/04	12:16P	812 397-2306	Princeton	IN	0.3	0.05
73	10/04	06:40P	508 241-8022	Marlboro	MA	0.3	0.05
74	10/04	06:41P	508 241-8022	Marlboro	MA	0.3	0.05
75	10/05	09:57A	205 979-4460	Birmingham	AL	7.6	1.21
76	10/05	12:16P	918 801-3149	Chelsea	OK	0.3	0.05
77	10/05	02:02P	205 764-6896	Tuscaloosa	AL	0.3	0.05
78	10/05	02:28P	205 764-6896	Tuscaloosa	AL	0.3	0.05
79	10/05	02:58P	334 289-5779	Montgomery	AL	1.0	0.16
80	10/05	03:34P	205 764-6896	Tuscaloosa	AL	6.1	0.97
81	10/05	06:28P	334 297-0696	Montgomery	AL	1.0	0.16
82	10/06	10:49A	334 377-0447	Prattville	AL	0.6	0.10
83	10/06	03:21P	205 420-1132	Birmingham	AL	5.7	0.91
84	10/07	09:02P	205 764-6896	Tuscaloosa	AL	37.0	5.88
85	10/08	12:00P	334 695-9997	Marion	AL	0.8	0.13
86	10/08	01:22P	205 756-7285	Birmingham	AL	0.3	0.05
87	10/08	01:32P	205 341-3691	Alexandrcy	AL	1.1	0.17
88	10/08	01:57P	205 756-7285	Birmingham	AL	0.3	0.05
89	10/08	04:08P	205 246-2695	Alexandrcy	AL	0.3	0.05
90	10/08	05:08P	205 837-9925	Dadeville	AL	0.3	0.05
91	10/08	06:59P	205 764-6896	Tuscaloosa	AL	0.3	0.05
92	10/08	07:20P	205 764-6896	Tuscaloosa	AL	0.3	0.05
93	10/08	07:58P	205 764-6896	Tuscaloosa	AL	20.4	3.24
94	10/09	06:58A	313 687-9113	Trenton	MI	0.3	0.05
95	10/09	11:37A	334 695-9997	Marion	AL	0.3	0.05
96	10/09	04:37P	334 695-9997	Marion	AL	6.9	1.10
97	10/09	07:07P	205 764-6896	Tuscaloosa	AL	19.8	3.15
98	10/09	07:27P	205 764-6896	Tuscaloosa	AL	3.2	0.51
99	10/11	08:48A	334 289-4103	Montgomery	AL	0.6	0.10
100	10/11	09:30A	304 501-8014	Minerlwlvs	WV	0.3	0.05
101	10/11	10:36A	904 849-8645	Destin	FL	2.5	0.40
102	10/11	01:06P	904 243-2031	Seagr Bch	FL	0.3	0.05
103	10/11	03:55P	904 243-1117	Seagr Bch	FL	0.3	0.05
104	10/11	05:31P	334 716-0402	Opelika	AL	0.7	0.11
105	10/11	06:37P	904 243-1965	Seagr Bch	FL	1.7	0.27
106	10/11	08:05P	904 243-1965	Seagr Bch	FL	6.5	1.03
107	10/11	09:09P	904 243-1965	Seagr Bch	FL	2.3	0.37
108	10/11	09:16P	904 243-1965	Seagr Bch	FL	0.4	0.06
109	10/12	09:45A	334 579-4837	Wetumpka	AL	1.2	0.19

TOTAL FOR : 800 815-7592 \$28.75

ACCOUNT NUMBER: 960310132-24

INVOICE DATE: 04/28/1998

PAGE 4

**EXHIBIT B**

**Articles of Incorporation and By-Laws**



**To all to whom these Presents Shall Come, Greeting:**

*I, George H. Ryan, Secretary of State of the State of Illinois,*

*do hereby certify that* ACCESS ONE, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JUNE 30, 1993, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS\*\*\*\*\*



**In Testimony Whereof,** *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois this* \_\_\_\_\_ **1ST**  
*day of* \_\_\_\_\_ **APRIL** *A.D., 19* **98**

*George H. Ryan*  
\_\_\_\_\_  
SECRETARY OF STATE

File Number 5737-247-8

**Whereas,** ARTICLES OF INCORPORATION OF  
ACCESS ONE, INC.  
INCORPORATED UNDER THE LAWS OF THE STATE OF ILLINOIS HAVE BEEN  
FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE  
BUSINESS CORPORATION ACT OF ILLINOIS, IN FORCE JULY 1, A.D. 1984.

*Now Therefore, I, George H. Ryan, Secretary of State of the  
State of Illinois, by virtue of the powers vested in me by law, do  
hereby issue this certificate and attach hereto a copy of the  
Application of the aforesaid corporation.*

**In Testimony Whereof,** *I hereto set my hand and cause to  
be affixed the Great Seal of the State of Illinois,  
at the City of Springfield, this 30TH  
day of JUNE A.D. 19 93 and  
of the Independence of the United States  
the two hundred and 17TH.*



*George H. Ryan*  
SECRETARY OF STATE



Form

BCA-2.10

## ARTICLES OF INCORPORATION

(Rev. Jan. 1991)

George H. Ryan  
Secretary of State  
Department of Business Services  
Springfield, IL 62756

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State."

FILED

JUN 30 1993

GEORGE H. RYAN  
SECRETARY OF STATE

SUBMIT IN DUPLICATE!

This space for use by  
Secretary of State

Date 6-30-93  
Franchise Tax \$ 25-  
Filing Fee \$ 75  
Approved: 2 100

1. CORPORATE NAME: ACCESS ONE, INC.

(The corporate name must contain the word "corporation", "company", "incorporated", "limited" or an abbreviation thereof.)

2. Initial Registered Agent: Kimberly L. McCool  
First Name Middle Initial Last Name  
Initial Registered Office: 29 South LaSalle Street 460  
Number Street Suite #  
Chicago 60603 Cook  
City Zip Code County

3. Purpose or purposes for which the corporation is organized:  
(If not sufficient space to cover this point, add one or more sheets of this size.)

The transaction of any or all lawful business for which corporations may be incorporated under the Business Corporation Act of Illinois.

4. Paragraph 1: Authorized Shares, Issued Shares and Consideration Received:

Class	Par Value per Share	Number of Shares Authorized	Number of Shares Proposed to be Issued	Consideration to be Received Therefor
Common	\$ 0.00	10,000	1,000.00	\$ 1,000.00

Paragraph 2: The preferences, qualifications, limitations, restrictions and special or relative rights in respect of the shares of each class are:  
(If not sufficient space to cover this point, add one or more sheets of this size.)

EXPEDITED

JUN 30 1993

SECRETARY OF STATE

(over)

- (a) Number of directors constituting the initial board of directors of the corporation: \_\_\_\_\_
- (b) Names and addresses of the persons who are to serve as directors until the first annual meeting shareholders or until their successors are elected and qualify:

Name

Residential Address

6. OPTIONAL: (a) It is estimated that the value of all property to be owned by the corporation for the following year wherever located will be: \$ \_\_\_\_\_
- (b) It is estimated that the value of the property to be located within the State of Illinois during the following year will be: \$ \_\_\_\_\_
- (c) It is estimated that the gross amount of business that will be transacted by the corporation during the following year will be: \$ \_\_\_\_\_
- (d) It is estimated that the gross amount of business that will be transacted from places of business in the State of Illinois during the following year will be: \$ \_\_\_\_\_

## 7. OPTIONAL: OTHER PROVISIONS

Attach a separate sheet of this size for any other provision to be included in the Articles of Incorporation, e.g., authorizing preemptive rights, denying cumulative voting, regulating internal affairs, voting majority requirements, fixing a duration other than perpetual, etc.

## 8. NAME(S) &amp; ADDRESS(ES) OF INCORPORATOR(S)

The undersigned incorporator(s) hereby declare(s), under penalties of perjury, that the statements made in the foregoing Articles of Incorporation are true.

Dated June 29, 1993

Signature and Name

Address

1. Kimberly L. McCool  
Signature  
Kimberly L. McCool  
(Type or Print Name)

1. 29 South LaSalle Street, #460  
Street  
Chicago Illinois 60603  
City/Town State Zip Code

2. \_\_\_\_\_  
Signature  
(Type or Print Name)

2. \_\_\_\_\_  
Street  
City/Town State Zip Code

3. \_\_\_\_\_  
Signature  
(Type or Print Name)

3. \_\_\_\_\_  
Street  
City/Town State Zip Code

(Signatures must be in ink on original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

NOTE: If a corporation acts as incorporator, the name of the corporation and the state of incorporation shall be shown and the execution shall be by its president or vice president and verified by him, and attested by its secretary or assistant secretary.

## FEE SCHEDULE

- The initial franchise tax is assessed at the rate of 15/100 of 1 percent (\$1.50 per \$1,000) on the paid-in capital represented in this state, with a minimum of \$25.
- The filing fee is \$75.
- The minimum total due (franchise tax + filing fee) is \$100.  
(Applies when the Consideration to be Received as set forth in Item 4 does not exceed \$16,667)
- The Department of Business Services in Springfield will provide assistance in calculating the total fees if necessary.

Illinois Secretary of State

Department of Business Services

Springfield, IL 62758

Telephone (217) 782-9522

782-9523

**EXHIBIT C**

**Certification of Authority to Engage in Business  
in Tennessee**

# Secretary of State

## Corporations Section

James K. Polk Building, Suite 1800

Nashville, Tennessee 37243-0306

DATE: 12/07/98  
REQUEST NUMBER: 3590-1526  
TELEPHONE CONTACT: (615) 741-2286  
FILE DATE/TIME: 12/07/98 1049  
EFFECTIVE DATE/TIME: 12/07/98 1049  
CONTROL NUMBER: 0361657

TO:  
ACCESS ONE INC  
125 N HALSTED ST  
4TH FL  
CHICAGO, IL 60661

RE:  
ACCESS ONE, 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: 12/07/98

FROM:  
C T CORPORATION SYSTEM (DC/VERMONT AVE)  
1025 VERMONT AVE NW  
SUITE 400  
WASHINGTON, DC 20005-0000

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

RECEIPT NUMBER: 00002393212  
ACCOUNT NUMBER: 00070922



*Riley C. Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE

# APPLICATION FOR CERTIFICATE OF AUTHORITY FOR

Access One, Inc.

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 Access One, Inc.

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

[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 Illinois

3. The date of its incorporation is June 30, 1993 (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 \_\_\_\_\_

125 N. Halsted St., 4th Floor, Chicago, Illinois 60661

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

c/o C T Corporation System, 530 Gay Street, Knoxville, Tennessee, County of Knox 37902

Street	City/State	County	Zip Code
--------	------------	--------	----------

The name of its registered agent at that office is

C T Corporation System

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

Lance Honea, 125 N. Halsted St., 4th Floor, Chicago, Illinois 60661, President & Secretary

Brian Barkley, 125 N. Halsted St., 4th Floor, Chicago, Illinois 60661, Treasurer

Mark Jozwiak, 125 N. Halsted St., 4th Floor, Chicago, Illinois 60661, Chief Executive Officer



**To all to whom these Presents Shall Come, Greeting:**

*I, George H. Ryan, Secretary of State of the State of Illinois,*

*do hereby certify that*

ACCESS ONE, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JUNE 30, 1993, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS\*\*\*\*\*



**In Testimony Whereof,** *I hereto set*  
*my hand and cause to be affixed the Great Seal of*  
*the State of Illinois this* \_\_\_\_\_ *3RD*  
*day of* \_\_\_\_\_ *DECEMBER A.D. 19* 98

*George H Ryan*  
\_\_\_\_\_  
SECRETARY OF STATE