

1717 Arch St, 3rd Floor Philadelphia, PA USA 19103

> Phone: 215.466.2873 kathleen.a.bonette@verizon.com

RECEIVED

NOV 0 8 2016 SOUTH DAKOTA PUBLIC UTILITIES COMMISSION

November 7, 2016

Patricia Van Gerpen, Executive Director South Dakota Public Utilities Commission 500 East Capitol Avenue Pierre, SD 57501-5070

Re: Notice of MCImetro Access Transmission Services LLC's Name Change to MCImetro Access Transmission Services Corp.

Dear Ms. Van Gerpen:

MCImetro Access Transmission Services LLC ("MCI LLC"), a certified local exchange carrier in South Dakota, hereby respectfully notifies the Commission of its recent corporate structure and name change to MCImetro Access Transmission Services Corp. ("MCI Corp.").

Attached please find for filing a copy of the associated forms that have been filed by the Secretary of State.

This change does not affect the rates, terms or conditions of services currently provided to the company's customers.

Please acknowledge receipt of this correspondence by date-stamping the extra copy and returning it to me in the enclosed, self-addressed, stamped envelope.

Please contact me with any questions.

Karhler J. Boutte

Very truly yours,

Kathleen A. Bonette

Enclosures

State of South Bakota



OFFICE OF THE SECRETARY OF STATE

Certificate of Authority Foreign Business

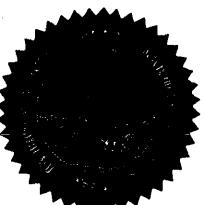
ORGANIZATIONAL ID# FB039668

I, Shantel Krebs, Secretary of State of the State of South Dakota, hereby certify that the Certificate of Authority of

MCIMETRO ACCESS TRANSMISSION SERVICES CORP.

duly signed and verified, have been received in this office and are found to conform to law.

ACCORDINGLY, and by virtue of the authority vested in me by law, I hereby issue this Certificate of Authority and attach hereto a duplicate of the Certificate of Authority.



IN TESTIMONY WHEREOF,

I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this 11/07/2016.

Shortel Krebs

Shantel Krebs Secretary of State

11/7/2016 11:08:00 AM Change ID: 1380898

APPLICATION FOR Secretary of State Office Receipt No 500 E Capitol Ave CERTIFICATE OF AUTHORITY Pierre, SD 5750 FOREIGN BUSINESS CORPORATION (605)773-4842 SDCL 47-1A-1501, 1503 RECEIVED Filed this Please Type or Print Clearly in Ink FILING FEE: \$750 payable to SECRETARY OF STATE NOV 07 2016 S.D. SEC. OF STATE SECRETARY OF STATE Telephone # _ Application must be accompanied by a one page Original Certificate of Existence issued by the Secretary of State or other official having custody of the corporate records in the state or other jurisdiction under whose law it is incorporated. 1. The Name of the corporation: MCImetro Access Transmission Services Corp. 2. If the name indicated above does not include the term corporation, incorporated, company, limited or the applicable abbreviation, then what is the alternative name adopted: 3. The name of the state or other jurisdiction under whose laws it is incorporated: Delaware 4. The address of its principal office (this is the address of the executive offices of the company): 07920 **Basking Ridge** One Verizon Way ZIP+4 State Street Address ZIP+4 State Mailing Address if different from street address Email Address (Optional) 5. The South Dakota Registered Agent's name: South Dakota law permits the registered agent to be either a noncommercial registered agent (this may be an individual) ((a) below), a commercial registered agent ((b) below), or an office holder ((c) below). Complete only one below, either (a) or (b) or (c). (a) The South Dakota Noncommercial Registered Agent's name C T Corporation System 57501 SD Pierre, 319 S. Coteau Street, State ZIP+4 Actual Street Address in this State City State ZIP+4 Mailing Address in this State, if Different from Street Address City Email Address (Optional) (b) When listing a Commercial Registered Agent, please state their CRA#. This number can be obtained from the Commercial Registered Agent. Name:

CRA#: CR000002

Business Office's Actual Street Address in this State		City	State	ZIP+4
mali Address (Optional)				
he names and usual busine le principal officer serves as	ess addresses of its principal of a director.	ficers and directors. Place a c	heck mark	next to the na
Christopher Formant	One Verizon Way	Basking Ridge	NJ	07920
President	Street Address	City	State	ZIP+4
Paul L Mattiola	One Verizon Way	Basking Ridge	NJ	07920
Vice President	Street Address	City	State	ZIP+4
Steven Tugentman	One Verizon Way	Basking Ridge	NJ	07920
Secretary	Street Address	City	State	ZIP+4
Matthew Ellis	One Verizon Way	Basking Ridge	NJ	07920
Treasurer	Street Address	City	State	ZIP+4
John Townsend	One Verizon Way	Basking Ridge	NJ	07920
Director .	Street Address	City	State	ZIP+4
Director	Street Address	City	State	ZIP+4
Director	Street Address	City	State	ZIP+4
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	ort knowing it is false in any ma	aterial respect. Any violation r	nay be subj	ect to a civil a
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nal penalty (SDCL 47-1A-12		Signature of an authorized person	el Gi	

Page 1

<u>Delaware</u>

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MCIMETRO ACCESS TRANSMISSION SERVICES

CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE

AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF

NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION

IS A NON-STOCK CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2900057 8300N SR# 20166466463

You may verify this certificate online at corp.delaware.gov/authver.shtml

Active W. Wallock, Secretary of State

Authentication: 203268533

Date: 11-02-16

Secretary of State Office 500 E Capitol Ave Pierre, SD 57501 (605)773-4845

CANCELLATION OF CERTIFICATE OF AUTHORITY OF A

FOREIGN LIMITED LIABILITY COMPANY

Please Type or Print Clearly in Ink

day of Please submit one Original and one Photocopy

Filed this Please Submit one Original and one Photocopy

NOV 0 7 2016 S.D. SEC. OF STATE

Telephone # _____

The undersigned, on behalf of the limited liability company named below, hereby cancels the certificate of authority pursuant to SDCL 47-34A-1007.

The name of the company is MCImetro Access Tran	smission Services LLC
Note: This must be the exact limited liability company nar	me.
2. The state of its formation is Delaware	
3. State the reason for filing this Certificate of Cancella	ition.
LLC is converting to a corporation.	
The cancellation must be signed by a member if the LL managed.	C is member-managed or by a manager if the LLC is manager-
Dated	(Signature of an Authorized Manager or Member)
By signing this form, you agree to have both the fee and the form processed electronically. A fee of up to \$40 will be assessed for	Christopher Formant (Printed Marie) Manager (Title)

foreignilccancellation April 2012

returned payments.