N. Y. S. DEPARTMENT OF STATE DIVISION OF CORPORATIONS

ALBANY, NY 12231-0001

FILED: 04/18/2012

FILING RECEIPT

ENTITY NAME: EMPIRE LONG DISTANCE CORPORATION

DOCUMENT TYPE : ASSUMED NAME CERTIFICATE

FILER:

----- CASH#: 278751

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TIM PRESTIGIACOMO 34 MAIN STREET

PRATTSBURGH NY 14873

APR 2 6 2012

PRINCIPAL LOCATION Empire Telephone Corp.
Prattsburgh MY 14873

4

34 MAIN STREET

PRATTSBURGH NY 14873

COMMENT:

HANDLE :

.00

ASSUMED NAME

EMPIRE ACCESS

SERVICE COMPANY: +++ NO SERVICE COMPANY +++ CODE:

BOX :

FEES 430.00 PAYMENTS: 430.00

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FILING: 25.00 CASH: COUNTY: 375.00 CHECK: 430.00

COPIES: 30.00 C CARD:

MISC : .00

REFUND

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## NEW YORK STATE DEPARTMENT OF STATE Division of Corporations, State Records and UCC One Commerce Plaza, 99 Washington Ave, Albany, NY 12231

TO: TOM PRESTIGIACOMO 34 MAIN STREET PRATTSBURGH, NY 14873 RECEIVED

APR 2 6 2012

Empire Telephone Corp. Prattsburgh NY 14873

## STATE OF NEW YORK DEPARTMENT OF STATE

RECEIVED

APR 2 6 2012

Empire Telephone Corp. Prattsburgh NY 14873

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on April 23, 2012.

Daniel E. Shapiro

First Deputy Secretary of State

Division of Corporations, State Records and Uniform Commercial Code
One Commerce Plaza, 99 Washington Ave,
Albany, NY 12231-0001

## Certificate of Assumed Name Pursuant to General Business Law, §130

www.dos.ny.gov

1. NAME OF ENTI	TY		5. J. A. B. W.	· · · · · · · · · · · · · · · · · · ·	ji.	
Empire Long Distance Corporation						
1a. FOREIGN ENTITIES ONLY. If applicable, the fictitious name the entity agreed to use in New York State is:						
2. NEW YORK LA	W FORMED OR AUT	HORIZED UNDER (C	HECK ONE):			<del></del>
⊠ Business Corporation Law				Limited Liability Company Law		
Education Law				Not-for-Profit Corporation Law		
Insurance Law				Revised Limited Partnership Act		
Other (specify law):						
3. ASSUMED NAME						
<b>.</b>	_					
Empire Access 4. PRINCIPAL PLACE OF BUSINESS IN NEW YORK STATE (MUST BE NUMBER AND STREET, IF NONE, INSERT OUT-OF-STATE ADDRESS)						
4.1 (0110), (6.1 6)	NOC OF BOOMEDS I	TOMA TOMA OF ALL	(WOOT DE NOMBEN	·	te, moent oor or a	TATE ADDRESS
34 Main Street  Prottohurgh, NV 14973						
Prattsburgh, NY 14873						
5. COUNTIES IN WHICH BUSINESS WILL BE CONDUCTED UNDER ASSUMED NAME						
ALL COUNTIES (if not, circle county[ies] below)						
Albany	Clinton	Genesee	Monroe	Orleans	Saratoga	Tompkins
Allegany	Cotlond	Greene	Montgomery	Oswego	Schenectady Scheharia	Ulster
Broome Broome	Cortland Delaware	Hamilton Herkimer	Nassau New York	Otsego Putnam	Schoharie Schuyler	Warren Washington
Cattaraugus	Dutchess	Jefferson	Niagara	Queens	Seneca	Wayne
Cayuga	Erie	Kings	Oneida	Rensselaer	Steuben	Westchester
Chautaugua	Essex	Lewis	Onondaga	Richmond	Suffolk	(Wyoming)
Chemung	Franklin	Livingston	Ontario	Rockland	_Sulfivan	Yates
Chenango	Fulton	Madison	Orange	St. Lawrence	Tioga	
6. INSERT THE ADDRESS OF EACH LOCATION WHERE BUSINESS WILL BE CARRIED ON OR TRANSACTED UNDER THE ASSUMED NAME.  Use a continuous sheet, if needed. (The address must be set forth in terms of a number and street, city, state and zip code. Please note that the						
address(es) ref	lected in paragraph 6	must be within the co	unty(ies) circled in par	agraph 5. If the entity d		
	_	d name please check	іпе віаіетені веюж.)			
34 Main	Street rgh, NY 14873					
Fiallsbu	ign, N1 14075					
			•			
•						
No New York State Business Location						
1						

INSTRUCTIONS FOR SIGNATURE: If corporation, by an officer; if limited partnership, by a general partner if imited bathing a company, by a member or manager or by an authorized person or attorney-in-fact for such corporation, limited partnership, or limited liability company. If the certificate is signed by an attorney-in-fact, include the name and title of the person for whom the attorney-in-fact is acting. (Example, John Smith, attorney-in-fact for Robert Johnson, president.)

Tom Prestigiacomo
Name of Signer

Chief Financial Officer
Title of Signer

CERTIFICATE OF ASSUMED NAME
OF

Empire Long Distance Corporation

(Insert Entity Name)
Pursuant to §130, General Business Law

Filed by: Tom Prestigiacomo
(Name)
34 Main Street
(Mailing address)
Prattsburgh, NY 14873
(City, State and Zip code)

NOTE: This form was prepared by the New York State Department of State. You are not required to use this form. You may draft your own form or use forms available at legal stationery stores. The Department of State recommends that all documents be prepared under the guidance of an attorney. The certificate must be submitted with a \$25 fee. The Department of State also collects the following, additional, county clerk fees for each county in which a corporation does or transacts business: \$100 for each county within New York City (Bronx, Kings, New York, Queens and Richmond) and \$25 for each county outside New York City. All checks over \$500 must be certified.

(For office use only)

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STATE OF NEW YORK DEPARTMENT OF STATE

APR 18 2012

BY.

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