#### Lance J.M. Steinhart, P.C.

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Also Admitted in New York and Maryland

Telephone: (770) 232-9200

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Email: lsteinhart@telecomcounsel.com

August 18, 2003

#### **VIA OVERNIGHT DELIVERY**

Mr. Thomas Dorman Executive Director Kentucky Public Service Commission 211 Sower Boulevard Frankfort, Kentucky 40602-0615 (502) 564-3940 **RECEIVED** 

AUG 1 9 2003

PUBLIC SERVICE COMMISSION

Re:

MG LLC d/b/a SearsConnect

Notice of Intention to Business as a Resold Wireless Carrier

Dear Mr. Dorman:

Pursuant to KRS 278.512 and 278.514, the company provides the following information:

- (1) The name and address of the company is as follows: MG LLC d/b/a SearsConnect, Two Executive Drive, Suite 900, Fort Lee, New Jersey 07024.
- (2) A copy of the company's certificate of authority from the Secretary of State is attached hereto as Exhibit A.
- (3) The name, address, telephone number and fax number of the responsible contact for complaints and regulatory issues is David Byron, MG LLC d/b/a SearsConnect, Two Executive Drive, Suite 900, Fort Lee, New Jersey 07024, (201) 461-5665 (Phone), (201) 461-1963 (Fax).

Mr. Thomas Dorman Executive Director Kentucky Public Service Commission August 18, 2003 Page 2

I have also enclosed an extra copy of this letter to be date-stamped and returned to me in the enclosed preaddressed, postage-prepaid envelope. If you have any questions or if I may provide you with additional information, please do not hesitate to contact our. Thank you.

Respectfully submitted,

Lance J.M. Steinhart

Attorney for MG LLC d/b/a SearsConnect

Enclosures

cc: David Byron

## **CERTIFICATE OF AUTHORITY**

# COMMONWEALTH OF KENTUCK JOHN Y. BROWN III SECRETARY OF STATE



0565727.06

sbates ADD

John Y. Brown III Secretary of State Received and Filed 08/08/2003 12:32:22 PM Fee Receipt: \$90.00

#### **APPLICATION FOR CERTIFICATE OF AUTHORITY**

Pursuant to the provisions of Kentucky on behalf of the limite	KRS Chapter 275, the used liability company named	ndersigned he below and for	reby applies for that purpose subm	authority to tran	sact business in statements:
	nited liability company (LLC ofessional limited liability co		·).		
2.The name of the limited liabil MGi LLC	ity company is				·
3.The name of the limited liabil	ty company to be used in h	Kentucky is			
4 Delaware	•	ne" is unavallable for us	•		
5. April 30, 2003 of dissolution, the latest date		organization ar	nd, if the limited lia	bility company h	as a specific date
6. The street address of the office address is  Two Executive Dr., Ste. 9	·	d in the state o	of formation or, if n	ot so required, t	ne principal
7.The names and usual busine See Attached	ss addresses of the current	managers, if a	ny, are as follows:	:	
Name			Ad	dress	<del></del>
Name	(Attach a continu	uation, if necessary)	Ad	dress	
8. The street address of the reg 828 Lane Allen Road, St	stered office in Kentucky is a. 219, Lexington, KY 40	0504		_	
and the name of the registere	d agent at that office is TC	S Corporate	City Services, Inc.	State	Zip Code
9. This application will be effect	<u> </u>	ayed effective	date and/or time i	s specified:	
l certify that, as of the date of liability company under the law	filing this application, the		limited liability co	mpany validly e	xists as a limited
		Day	•••	or Print Name & Title	nber
TCS Corporate Services,		Date			ne limited liability compan
			·	Registered Agent  Charlest Finit Name & Title	tesident.

SLL-902 (2/98)

(See attached sheet for instructions)

# LIST OF MEMBERS & DIRECTORS OF MG LLC

# **Members**

Marc Byron David Graf The Halyard Capital Fund

## **Directors**

None

All the above referenced Members & Directors can be reached at: Two Executive Drive, Suite 900, Fort Lee, New Jersey 07024

# COMMONWEALTH OF KENTUCKY JOHN Y. BROWN III SECRETARY OF STATE



0565727.06

sbates ADD

John Y. Brown III Secretary of State Received and Filed 08/08/2003 12:32:22 PM Fee Receipt: \$90.00

#### **APPLICATION FOR CERTIFICATE OF AUTHORITY**

	apter 275, the undersigned hereby applies for authority to transact business in company named below and for that purpose submits the following statements:			
	ty company (LLC). limited liability company (PLLC).			
The name of the limited liability compan	ıy is			
The name of the limited liability company	ny to be used in Kentucky is			
	(If "real name" is unavailable for use)			
Delaware	is the state or country of organization.			
April 30, 2003 of dissolution, the latest date upon which	is the date of organization and, if the limited liability company has a specific date the limited liability company is to dissolve is			
The street address of the office required office address is Two Executive Dr., Ste. 900, Fort L	d to be maintained in the state of formation or, if not so required, the principal			
The names and usual business address See Attached	ses of the current managers, if any, are as follows:			
Name	Address			
Name ·	(Attach a continuation, if necessary)			
The street address of the registered office 828 Lane Allen Road, Ste. 219, Le				
Street	City State Zip Code			
and the name of the registered agent at	t that office is TCS Corporate Services, Inc.			
This application will be effective upon fill	ling, unless a delayed effective date and/or time is specified:			
, ,	application, the above-named limited liability company validly exists as a limited risdiction of its formation.			
	Signature			
	David Graf Member			
	Date: July 23 , 20 0.3			
TCS Corporate Services, Inc.  Type or print name of registered agent	consent to have as the registered agent on behalf of the limited liability compa			
	Signature of Registered Agent			

SLL-902 2/96)

(See attached sheet for instructions)

# LIST OF MEMBERS & DIRECTORS OF MG LLC

## **Members**

Marc Byron
David Graf
The Halyard Capital Fund

## **Directors**

None

All the above referenced Members & Directors can be reached at: Two Executive Drive, Suite 900, Fort Lee, New Jersey 07024

# COMMONWEALTH OF KENTUCKY JOHN Y. BROWN III SECRETARY OF STATE



0565727.12

John Y. Brown III Secretary of State Received and Filed

08/08/2003 Fee Receipt: \$20.00 sbates

#### **CERTIFICATE OF ASSUMED NAME**

This certifies that the assumed name of			
SeamsConnect			
[Name under which the b	Nainess will be conducted)		
has been adopted byMG_LLC	<u></u>		
(Real name - K	(RS 385.015(1))		
which is the "real name" of [YOU MUST CHECK ONE]			
a Domestic General Partnership	a Foreign General Partnership		
a Domestic Registered Limited Liability Partnership	a Foreign Registered Limited Liability Partnership		
a Domestic Limited Partnership	a Foreign Limited Partnership		
a Domestic Business Trust	a Foreign Business Trust		
a Domestic Corporation	a Foreign Corporation		
a Domestic Limited Liability Company	a Foreign Limited Liability Company		
a Joint Venture			
organized and existing in the state or country of, and whose addre			
Two Executave Dr., Ste. 900, Fort Lee, NJ 070	24		
Street address, if any	City State Zip Code		
The certificate of assumed name is executed by			
Dolls			
Member	Signature		
Print or type name and title Tinden 23 2003	Print or type name and title		
Oate .	Date		

# COMMONWEALTH OF KENTUCKY JOHN Y. BROWN III SECRETARY OF STATE



0565727.12

sbates C226

John Y. Brown III Secretary of State Received and Filed 08/08/2003 Fee Receipt: \$20.00

#### **CERTIFICATE OF ASSUMED NAME**

This certifies that the assumed name of					
SearsConnect					
[Name under which the bu	elness will be conducted)				
has been adopted byMG_LLC					
(Real name - Ki	RS 385.015(1)]				
which is the "real name" of [YOU MUST CHECK ONE]					
a Domestic General Partnership	a Foreign General Partnership				
a Domestic Registered Limited Liability Partnership	a Foreign Registered Limited Liability Partnership				
a Domestic Limited Partnership	a Foreign Limited Partnership				
a Domestic Business Trust	a Foreign Business Trust				
a Domestic Corporation	a Foreign Corporation				
a Domestic Limited Liability Company	a Foreign Limited Liability Company				
a Joint Venture					
organized and existing in the state or country of	, and whose address is				
Two Executive Dr., Ste. 900, Fort Lee, NJ 070	24				
Street address, if any	City State Zip Code				
	•				
The certificate of assumed name is executed by					
Dredde					
Signature	Signature				
Meinber Print or type name and title	Print or type name and title				
Tuly 23, 2003					
Date	Cate				

ior

SSC-226 (7/98)

(See attached sheet for instruction

Mail to: Larce Steinhart 1720 Windward Concourse Synta # 250 Alpharetta GA 30005 I, Donald W Blevins, County Court Clerk of Fayette County, Kentucky, hereby certify that the foregoing instrument has been duly recorded in my office.

By: Doug BRADLEY, dc

200308130303

August 13, 2003

10:28:38 AM

Fees

\$9.00

Tax

\$.00

**Total Paid** 

\$9.00

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