EXHIBIT B

South Dakota Secretary of State Certificate

State of South Dakota



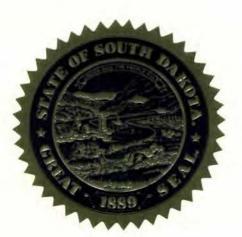
OFFICE OF THE SECRETARY OF STATE

Amended Certificate of Authority Limited Liability Company

ORGANIZATIONAL ID #: FL005704

I, Jason M. Gant, Secretary of State of the State of South Dakota, hereby certify that duplicate of the Application for an Amended Certificate of Authority of ZONE TELECOM, LLC changing tis name to ANPI BUSINESS, LLC (DE) to transact business in this state duly signed and verified pursuant to the provisions of the South Dakota Limited Liability Company Act, 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 Amended Certificate of Authority and attach hereto a duplicate of the application to transact business in this state.



IN TESTIMONY WHEREOF, I

have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this December 26, 2012.

> Jason M. Gant Secretary of State

> > Americano Enduthmente Merge

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

APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

FOREIGN LIMITED LIABILITY COMPANY

Please Type or Print Clearly in Ink

Please submit one Original and one Photocopy

FILING FEE: \$750 payable to SECRETARY OF STATE

DEC 2 6 2012 S.D. SEC. OF STATE

Telephone	#	
FAX#		

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 organizational records in the state or country under whose law it is organized.

Note: This must be the exact limited liability company name	as currently on file.		
The amended name is ANPI Business, LLC			
The name must include limited liability company, limited company or and company may be abbreviated as Co.	r the abbreviation L.L.C., LLC, L.C.	or LC. Limited may be	e abbreviated as L
The name of the state or country under whose laws it is	organized is Delaware		
The period of its duration Perpetual			
The period of its duration Perpetual The address of its principal office (this is the address of	the executive offices of the	corporation).	
The address of its principal office (this is the address of			62711
	the executive offices of the Springfield City	corporation). IL State	62711 ZIP+4
The address of its principal office (this is the address of 3130 Pleasant Run Street Address	Springfield	IL	
The address of its principal office (this is the address of 3130 Pleasant Run	Springfield City	IL State State	ZIP+4
The address of its principal office (this is the address of 3130 Pleasant Run Street Address Mailing Address (Optional) Please complete only if there is a change to any of the	Springfield City	IL State State	ZIP+4
The address of its principal office (this is the address of 3130 Pleasant Run Street Address Mailing Address (Optional)	Springfield City	IL State State	ZIP+4
The address of its principal office (this is the address of 3130 Pleasant Run Street Address Mailing Address (Optional) Please complete only if there is a change to any of the	Springfield City	IL State State	ZIP+4

Manager	Street Address	City	State	ZIP+4
fanager	Street Address	City	State	ZIP+4
lanager	Street Address	City	State	ZIP+4
Whether one or more of imilar to SDCL 47-34A-	the members of the company are to b	e liable for its debts and ob	ligations under a	provisio
NZ Communications, LLC 130 Pleasant Run Spring				
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pplication must be sign	ed by a Manager so stated in question n	number 7 or a Member if the o	company is memb	er mana
	ed by a Manager so stated in question n	number 7 or a Member if the o	company is memb	er mana
10 10 11	γ	/m		er mana
0 12/20/1	γ (S	ignature of an authorized member		er mana
By signing this for	rm, you agree to	/m		er mana
By signing this for have both the fee	rm, you agree to and the form	ignature of an authorized member oseph O'Hara trinted Name)		er mana
By signing this for	rm, you agree to and the form onically. A fee of	ignature of an authorized member oseph O'Hara Printed Name)		

7. Please check one:

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ANPI BUSINESS, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE SEVENTEENTH DAY OF DECEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANPI BUSINESS, LLC" WAS FORMED ON THE THIRTEENTH DAY OF JUNE, 'A.D. 2000.

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

3242585 8300

121347213

AUTHENTY CATION: 0072695

DATE: 12-17-12

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