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CR2E031 (1-89)

# · APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

dPi Teleconnect, L.L.C. (Name of foreign limited liability cocompany" or their abbreviations "L.l.	ompany must end L.C." or "L.C." if	with the words "linot so contained i	imited liability c	company" or "liresent.)	nited
Delaware		3. <b>7</b> 5-2793726		- ,	
(Jurisdiction under the law of which company is organized)	foreign limited	liability (I	FEI number, if a	pplicable)	
December 10, 1998	5	Pe	eperual		
(Date of Organization)	)	(Duration: Year cease to exist or		company will	9
NA					.S.)
(Date first transacted b	ousiness in Florid	la. (See sections 6	08.501, 608.502	and 817.155, F	
2997-LBJ Freeway, Suite 2	25				
Dallas, TX 75234					(
List name, title, and business ad will manage the foreign limited	dress of each i	ress of principal offi managing memb any in Florida:	er [MGRM] o	r manager [M onal page if ne	[GR]
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List name, title, and business ad will manage the foreign limited  NAME & ADDRESS:  David M. Pikoff	dress of each r liability comp TITLE:	managing memb any in Florida: NAME & AI	er [MGRM] of (attach addition)	onal page if ne	[GR] v
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List name, title, and business ad will manage the foreign limited  NAME & ADDRESS:  David M. Pikoff  2997-LBJ Freeway, Ste.  225, Dallas, TX 75234	dress of each r liability comp TITLE: MGRIM	managing memb any in Florida: NAME & AI	er [MGRM] of (attach addition)	onal page if ne	[GR] v

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is:	
dPi Teleconnect, L.L.C.	
The name and the Florida street address of the registered agent and office are:	66 18 18
C T CORPORATION SYSTEM (Name)	JAN 25
1200 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE)	OF STATE OF
Plantation FL 33324	<b>5</b> 15
	The name and the Florida street address of the registered agent and office are:  C T CORPORATION SYSTEM (Name)  1200 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature) Victor Alfano, Asst. Secy.

Filing Fee: \$35 for Designation of Registered Agent

CORPORATION SYSTEM

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

Th	e undersigned member or authorized representative of a member of dPi Teleconne	ct, L.I	
	certifies:		
1)	the above named limited liability company has at least two members;		
2)	the total amount of cash contributed by the member(s) is	\$ <u>500</u>	,000 ;
	if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and	s_n	<u>r</u> ;
4)		\$ 1,500	000
	Signature of a member or authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	r.	
	David M. Pikoff		
	Typed or printed name of signee	99 JAN 25 PM 3: 2A	FILLO SECRETARY OF STATE IVISION OF CORPORATIONS
	Filing Fee: \$250.00 for Application and Affida	vit	

#### State of Delaware

#### Office of the Secretary of State

PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DPI TELECONNECT, L.L.C." 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 FIFTEENTH DAY OF JANUARY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AUTHENTICATION:

9525373 DATE:

991019307

2977577 8300

01-15-99