| COPPELL,                                    | TX 75019 US  |                                    |                       |  |
|---|--|------------------------------------|-----------------------|--|
| FEI Number                                  | Certificate of   |                                    |                       |  |
| Name and A                                  | ddress of Current Registered Agent                       | :                                  |                       |  |
| NRAI SERVICE<br>1200 SOUTH P<br>PLANTATION, | INE ISLAND ROAD  |                                    |                       |  |
| The above named                             | l entity submits this statement for the purpose of chang | ing its registered office or regis | tered agent, or both, |  |
| SIGNATURE: JENNIFER QUINN                   |  |                                    |                       |  |
|   | Electronic Signature of Registered Agent                 |                                    |                       |  |
| Officer/Dire                                | ctor Detail :  |                                    |                       |  |
| Title                                       | DIRECTOR, SECRETARY                                      | Title                              | DIRECTOR, CEO         |  |
| Name  | TEICHMANN, DAVID L.                                      | Name                               | HEARD, DAVID          |  |
| Address                                     | 6373 SAN IGNACIO AVENUE                                  | Address                            | 6373 SAN IGNA         |  |
| City-State-Zip:                             | SAN JOSE CA 95119  | City-State-Zip:                    | SAN JOSE CA           |  |
| Titlo                                       |  | Title                              | ASST TREASU           |  |

## 2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001224

Entity Name: INFINERA (USA) INC.

## **Current Principal Place of Business:**

615 E. STATE HIGHWAY 121, SUITE 330 COPPELL, TX 75019

## **Current Mailing Address:**

615 E. STATE HIGHWAY 121, SUITE 330

n, in the State of Florida.

| Officer/Director Detail : |                         |                 |                          |  |  |
|---------------------------|-------------------------|-----------------|--------------------------|--|--|
| Title                     | DIRECTOR, SECRETARY     | Title           | DIRECTOR, CEO, PRESIDENT |  |  |
| Name                      | TEICHMANN, DAVID L.     | Name            | HEARD, DAVID W.          |  |  |
| Address                   | 6373 SAN IGNACIO AVENUE | Address         | 6373 SAN IGNACIO AVENUE  |  |  |
| City-State-Zip:           | SAN JOSE CA 95119       | City-State-Zip: | SAN JOSE CA 95119        |  |  |
| Title                     | CFO, TREASURER          | Title           | ASST. TREASURER          |  |  |
| Name                      | ERBA, NANCY L.          | Name            | LEBECK, DANA             |  |  |
| Address                   | 6373 SAN IGNACIO AVENUE | Address         | 6373 SAN IGNACIO AVENUE  |  |  |
| City-State-Zip:           | SAN JOSE CA 95119       | City-State-Zip: | SAN JOSE CA 95119        |  |  |
| <b>T</b> :41-             |                         |                 |                          |  |  |
| Title                     | ASST. SECRETARY         |                 |                          |  |  |
| Name                      | HOPP, MICHAEL           |                 |                          |  |  |
| Address                   | 6373 SAN IGNACIO AVENUE |                 |                          |  |  |
| City-State-Zip:           | SAN JOSE CA 95119       |                 |                          |  |  |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID L. TEICHMANN

SECRETARY

01/16/2021

Electronic Signature of Signing Officer/Director Detail

Date

## FILED Jan 16, 2021 **Secretary of State** 9468838585CC

01/16/2021 Date

of Status Desired: No