

CT CORPORATION SYSTEM

B01000000096

CORPORATION(S) NAME

Network Equipment, L.P.

Ta .F

FILED
01 MAR 20 PM 14:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600003888726--5
-03/20/01--01084--008
*****87.50 *****87.50

- | | | |
|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

RECEIVED
01 MAR 20 PM 12:33
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

3/20/01

Order#: 3724134

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

File 2nd

mk
7/20

7

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. Network Equipment, L.P.
(Name of limited partnership as it is in the home state)
2. ~~Network Equipment, Limited Partnership~~
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. Delaware 4. January 23, 2001
(State of Formation) (Date of Formation)

5. CT Corporation System
(Name of Registered Agent for Service of Process)

6. c/o CT Corporation System, 1200 South Pine Island Road
(Street Address of Registered Office)

Plantation, Florida 33324
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

CT Corporation System

**KIRK HOOD
ASSISTANT SECRETARY**

(Agent must sign on this line)

8. 1001 Louisiana Street, Houston, Texas 77002

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

TeleEquipment Management Company, 1001 Louisiana Street, Houston, Texas 77002

F01000001503

10. 1001 Louisiana Street, Houston, Texas 77002
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

1001 Louisiana Street, Houston, Texas 77002
12. _____

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 28th day of February, 2001

TeleEquipment Management Company

David L. Siddall

General Partner

David L. Siddall, Vice President

STATE OF TEXAS

COUNTY OF HARRIS

FILED
01 MAR 20 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

On this 28th day of February, 2001

David L. Siddall personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Pilar DeAnda

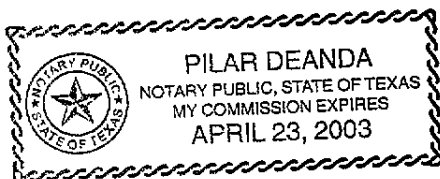
(Notary Public Signature)

Pilar DeAnda

(Notary's Printed Name)

Seal

My Commission Expires: April 23, 2003



AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

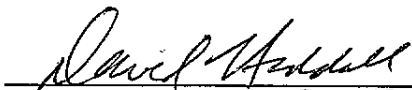
BEFORE ME the undersigned personally appeared David L. Siddall, VP of TeleEquipment Management Company,
a general partner of Network Equipment, Limited Partnership a (an) Delaware
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 1,000.00 .
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 1,000.00 .

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 28th day of February, 2001 .

TeleEquipment Management Company



General Partner

David L. Siddall, Vice President

FILED
01 MAR 20 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF TEXAS

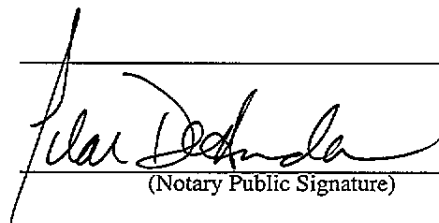
COUNTY OF HARRIS

On this 28th day of February, 2001 .

David L. Siddall, VP of TeleEquipment Management Company, personally appeared before me,

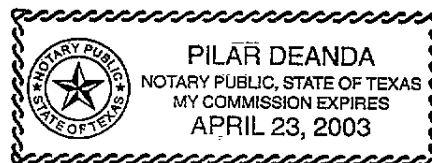
☒ who is personally known to me

☐ whose identity I proved on the basis of _____


(Notary Public Signature)

Pilar DeAnda

(Notary's Printed Name)



Seal

My Commission Expires: April 23, 2003