

CT CORPORATION

# 301000600096

CORPORATION(S) NAME

Network Equipment, L.P.

FILED  
02 APR 18 PM 2:00  
SECRETARY OF STATE  
TALLHASSEE, FLORIDA

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Profit              | <input type="checkbox"/> Amendment                         | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit           |  |   |
| <input type="checkbox"/> Foreign             | <input checked="" type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|  | <input type="checkbox"/> Reinstatement                     |   |
| <input 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 RA       |
|  | <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  
02 APR 18 AM 10:42  
DIVISION OF CORPORATION

Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

4/18/02

Order#: 5269801

BK

kf

Ref#: 000005292490--9  
 -04/18/02--01019--006  
 \*\*\*\*\*52.50 \*\*\*\*\*52.50

Amount: \$ \_\_\_\_\_

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

**CERTIFICATE OF CANCELLATION  
FOR**

**NETWORK EQUIPMENT, L.P.**

(insert name currently on file with Florida Dept. of State)

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02 APR 18 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this certificate of cancellation in order to cancel its registration with the Florida Department of State. **TeleEquipment Management Company, The General Partner**

*David L. Siddall*

(Signature of a General Partner)

David L. Siddall, Vice President

(Typed or Printed name of General Partner Signing Above)

STATE OF TEXAS

COUNTY OF HARRIS

On this 5th day of April, 2002, David L. Siddall,  
personally appeared before me,

- who is personally known to me
- whose identity I proved on the basis of \_\_\_\_\_

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02 APR 18 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Pilar DeAnda*

Notary Public Signature

Pilar DeAnda

Notary's Printed Name

Seal

My Commission Expires: April 23, 2003

