

Document Number Only

**B99000000190**

CT Corporation System  
660 East Jefferson Street  
Tallahassee, FL 32301  
Tel 850 222 1092  
Fax 850 222 7615  
Attn: Jeff Netherton

300002873093--2  
-05/13/99--01004--020  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

CORPORATION(S) NAME

300002873093--2  
-05/13/99--01004--018  
\*\*\*\*\*26.25 \*\*\*\*\*8.75

Miller Technology Management, L.P.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Profit                         | <input checked="" 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 RA       |
|   | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy                 | <input type="checkbox"/> Photocopies            | <input checked="" 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                       |   |   |

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

05/12/99

**FILE SECOND**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 MAY 12 PM 4:12

RECEIVED

99 MAY 12 PM 3:15

13K  
5/12/99

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 MAY 12 PM 4:12

1. MULLER TECHNOLOGY MANAGEMENT, L.P.  
(Name of limited partnership as it is in the home state)
2. \_\_\_\_\_  
(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 15, 1999  
(State of Formation) (Date of Formation)
5. C T CORPORATION SYSTEM  
(Name of Registered Agent for Service of Process)
6. 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:  
C T Corporation System CONNIE BRYAN  
By: Connie Bryan SPECIAL ASSISTANT SECRETARY  
(Agent must sign on this line)
8. 1209 Orange Street  
Wilmington, Delaware 19801  
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS  
MTM I, LLC 1001 Brickell Bay Drive, 30th Floor  
Miami, Florida 33131  
19900000727
10. 1001 Brickell Bay Drive, 30th Floor, Miami, Florida 33131  
(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

12. 1001 Brickell Bay Drive, 30th FloorMiami, Florida 33131

(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.

Signed this 11 day of May, 19 99  
MPM I, LLC.

By: Edmund R. Miller  
Edmund R. Miller General Partner

STATE OF FloridaCOUNTY OF DadeOn this 11 day of May, 19 99

Edmund R. Miller personally appeared before me,

☒ who is personally known to me

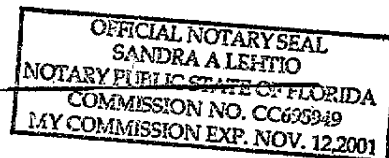
☐ whose identity I proved on the basis of \_\_\_\_\_

Sandra A. Lehtio  
 (Notary Public Signature)

SANDRA A. LEHTIO  
 (Notary's Printed Name)

Seal

My Commission Expires:



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 99 MAY 12 PM 4:12

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

FILED STATE  
DIVISION OF CORPORATIONS  
99 MAY 12 PM 4:12

BEFORE ME the undersigned personally appeared MM I, LLC by Edmund R. Miller  
a general partner of MILLER TECHNOLOGY MANAGEMENT, L.P., 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 \$ 0.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 0.

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.

Signed this 11 day of May, 19 99.

MM I, LLC

By: Edmund R. Miller  
Edmund R. Miller General Partner

STATE OF Florida

COUNTY OF Sade

On this 11 day of May, 19 99.

Edmund R. Miller, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

Sandra A. Lehtio  
(Notary Public Signature)

SANDRA A. LEHTIO  
(Notary's Printed Name)

Seal

My Commission Expires:

OFFICIAL NOTARY SEAL  
SANDRA A. LEHTIO  
NOTARY PUBLIC STATE OF FLORIDA  
COMMISSION NO. CC695949  
MY COMMISSION EXP. NOV. 12, 2001