

# F01000001539

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WAVET OPTICS, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARK A. PIGOTT  
(Name of Person)

WAVET OPTICS, INC.  
(Firm/Company)

1075 NINDWARD RIDGE PKY. SUITE 170  
(Address)

ALPHARETTA, GA 30342  
(City/State and Zip code)

600003878336--5  
-03/19/01--01147--019  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

For further information concerning this matter, please call:

MRS. PHYLLIS MEARS at (678) 339-1001

(Name of Person)

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
01 MAR 19 PM 12:50  
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. WAVE7 OPTICS, INC.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. DELAWARE 3. 94-3365657  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. JUNE 12, 2000 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. MARCH 5, 2001  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
IN FLORIDA (FLA SITE): (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 8010 WOODLAND CENTER BLVD, SUITE 500, TAMPA, FL 33614  
IN GEORGIA (CORPORATE HQ): (Principal office address)  
1075 WINDHARD RIDGE PKWY, SUITE 170, ALPHARETTA, GA 30005  
(Current mailing address)
8. DEVELOPMENT OF TELECOMMUNICATIONS PRODUCTS  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  
Name: CT Corporation System  
Office Address: 1200 South Pine Island Rd.  
Plantation, Florida 33324  
(City) (Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



**JOAN BOLDEN**

(Registered agent's signature)

**ASSISTANT SECRETARY**

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED  
01 MAR 19 PM 12:50  
TAMPA, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: MR. LATCH GRAHAM

Address: 1075 WINDWARD RIDGE PKY, SUITE 170, ALPHARETTA, GA 30005

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: MR. HASSAN PARSA

Address: 3180 PORTER DR., SUITE D, PALO ALTO, CA 94304

Director: MR. ROBIN BELLAS

Address: 2730 SAND HILL RD., SUITE 280, MENLO PARK, CA 94025

B. OFFICERS

President: MR. THOMAS TIGHE

Address: 1075 WINDWARD RIDGE PKY, SUITE 170, ALPHARETTA, GA 30005

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: MR. MARK PIGOTT

Address: 1075 WINDWARD RIDGE PKY, SUITE 170, ALPHARETTA, GA 30005

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Mark Pigott  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. MARK A. PIGOTT, SECRETARY  
(Typed or printed name and capacity of person signing application)

*State of Delaware*  
*Office of the Secretary of State*

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WAVE7 OPTICS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2001.

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



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 0992835

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DATE: 02-27-01