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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

(Enter name of "inc.," "Co.," "	corporation; must include "INCORPORATI Corp.," "Inc.," "Co.," or "Corp.")	ED,	" "Company," "Corporation,"	
(If name unava	ilable in Florida, unter alternate corporate na	me	adopted for the purpose of transacting business in Florida)	
Colorado		3.	84-1514996	
State or country	y under the law of which it is incorporated)		(FEI number, if applicable)	-
September 30,	1999	S .	Perpetual	_
	te of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	-
Upon Qualifica	ation			_
Date first trans	acted business in Florida. If corporation has		transacted business in Florida, insert "upon qualification.") , 607.1502 and 817.155, F.S.)	
4544 N . 1 N . 1	•	,2 (F)	CONTINUE WITTON CITANT LIVER	
27A7 Lemi Luk	way, Boulder, Colorado 80301 (Principal office a	arle!	rrss)	
and been bede	, ,	44141		
393 Leath Latk	way, Boulder, Coloredo 80301 (Current mailing :	add	reas)	
	•		O4	
Any lawful bus				F
(Purpose)	(s) of corporation authorized in home state of	reo	untry to be carried out in state of Florida)	
Name and str	eet address of Florida registered agen	t:	(Br) Bay as Mail Dran Bay NOT spanstakia)	-
N	C T Corporation System		r.O. Box of mail blob Box (1177) acceptance)	
Name:	O 1 Corporation of State		ب بن الله الله الله الله الله الله الله الل	
ice Address:	1200 South Pine Island Road			1
	Plantation		. Florida 33324	
	(City)		(Zip code)	

C T Corporation System

(Registered agent's signature)

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.

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

A. DIRI	ECTORS	
Chairman	:	
Address:		
Vice Chai	irman:	
Address:		
	·	
Director:	Roger L. Koenig	
Address:	5395 Pearl Parkway, Boulder, Colorado 8030)	

Director:	Nancy Pierce	
Address:	5395 Pearl Parkway, Boulder, Colorado 80301	
		•
B. OFF	ICERS	
Prosident:	Roger L. Koenig	로 우
Address:	5395 Pearl Parkway, Boulder, Colorado 80301	
		25 C
Vice Presi	ident:	TO THE
		$\simeq c$
Secretary:	Nanoy Pierce	
Address:	5395 Pearl Parkway, Boulder, Colorado 80301	
Treasurer:	Nancy Pierce	
Address:	5395 Pearl Parkway, Boulder, Colorado 80301	
VOTE: 1	f necessary, you may attach an addendum to the application listing additional officers and/or	directors.
13	Try ! Cary	and the same of th
a Rasses	(Signature of Director or Officer based in number 12 of the application) r L, Kocnig, President & CEO	
	- m)	

(Typed or printed name and capacity of person signing application)



DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

CARRIER ACCESS OPERATIONS COMPANY (Colorado CORPORATION)
File # 19991183698

was filed in this office on September 30, 1999 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: January 13, 2004

For Validation:

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onetta Davidson SECRETARY OF STATE