F05000005604

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATE
ALLANIASSEE FLORIE

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COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|---|--|--|--|--|--|
| SUBJECT: Brix Networks, Inc. | | | | | |
| (Name of corporation - must include suffix) | | | | | |
| Dear Sir or Madam: | | | | | |
| The enclosed "Application by Foreign Corporation for Authorizat "Certificate of Existence," and check are submitted to register the transact business in Florida. | | | | | |
| Please return all correspondence concerning this matter to the foll | owing: | | | | |
| Mr. Marc Macedo | | | | | |
| (Name of Person) | ALP COST OF ASS COST | | | | |
| Brix Networks, Inc. | | | | | |
| (Firm/Company) | | | | | |
| 285 Mill Road | | | | | |
| (Address) | | | | | |
| Chelmsford, MA 01824 | | | | | |
| (City/State and Zip co | de) Zs 2 | | | | |
| For further information concerning this matter, please call: (City/State and Zip code) ASS SET OF | | | | | |
| Marc Macedo at (978) 367 | -5631 mg = r | | | | |
| | -5631 Sylime Telephone Number) SH CO | | | | |
| Registration Section Division of Corporations Clifton Building | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | | | |
| Enclosed is a check for the following amount: | | | | | |
| <u>_</u> | iling Fee & S87.50 Filing Fee, I Copy 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. Brix Network | | | | | |
|---------------------------|--|------|--|---------------------------------------|---------------|
| | rporation; must include "INCORPORATE rp," "Inc," "Co," or "Corp.") | ≧D,' | "CÔMPANY," "CORPORATION," | | |
| | 11 - 11 - 11 | | | · · · · · · · · · · · · · · · · · · · | |
| (If name unavaila | ble in Florida, enter alternate corporate na | | adopted for the purpose of transacting busi | iness in Florida) | |
| 2. State of De | | 3. | 043474354 | | |
| (State or country u | inder the law of which it is incorporated) | | (FEI number, if applicable | :) | |
| 4. May 26, 19 | 99 | 5. | Perpetual | | |
| (Date of | of incorporation) | | (Duration: Year corp. will cease to exist | or "perpetual") | |
| _{6.} June 20, 2 | .005 | | | | |
| · | (Date first transacted busines | | Florida, if prior to registration) | | |
| | • | | 02, F.S., to determine penalty liability) | | |
| _{7.} 285 Mill Ro | oad, Chelmsford, MA 0182 | | | | |
| | (Principal office a | addı | ress) | | |
| 285 Mill Re | oad, Chelmsford, MA 018 | 32 | 4 | | |
| | (Current mailing a | addı | ress) | ₹ | |
| 8. sales offic | e | | | 2005 SEP 23 SECRETARY ALLAWASSE | \$10 <u>0</u> |
| (Purpose(s) | of corporation authorized in home state o | r co | untry to be carried out in state of Florida) | P | - I |
| 9. Name and street | address of Florida registered agent: (| P.C | . Box NOT acceptable) | Tri — | 11 |
| Name: | Marc Macedo | | | F COL | Final Park |
| Office Address: | 3256 NW 64th Street | | | AM 10: 03 OF STATE FLORIDA | |
| | Boca Raton | | , Florida_33496 | | |
| | (City) | | (Zip code) | | |
| 10 75 1.4 1 . | . 44 | | | | |

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.

(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. DIRECTORS | |
|--|--------------------|
| Chairman: Thomas Pincince | |
| Address: 285 Mill Road | |
| Chelmsford, MA 01824 | |
| Vice Chairman: | |
| Address: | |
| Director: Joe Chinnici; Rubin Gruber; Rob Ketterson | |
| Address: 285 Mill Road | |
| Chelmsford, MA 01824 | |
| Director: Nina Saberi; Alan Taffel; Mike Zak | |
| Address: 285 Mill Road | |
| Chelmsford, MA 01824 | |
| B. OFFICERS | |
| President: Thomas Pincince | |
| Address: 285 Mill Road | |
| Chelmsford, MA 01824 | |
| Vice President: Maura McInerney | 2008 SEC ALL |
| Address: 285 Mill Road | ARR SET |
| Chelmsford, MA 01824 | 23 SSE |
| Secretary: Maura McInerney | FS ₹ M |
| Address: 285 Mill Road, Chelmsford, MA 01824 | 97 O. O. |
| Treasurer: Maura McInerney | <i>></i> ω |
| Address: 285 Mill Road, Chelmsford, MA 01824 | |
| NOTE: If necessary, you may attach an addendum to the application listing additional of | |
| (Signature of Director or Officer listed in number 12 of the applica | tion) |
| Maura McInerney, Chief Financial Officer (Typed or printed name and conseity of person signing application) | m) |
| (Typed or printed name and capacity of person signing application | ui) |

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRIX NETWORKS, 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 FOURTEENTH DAY OF SEPTEMBER, A.D. 2005.



Warriet Smith Windson Sacretary of State

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4154054

DATE: 09-14-05

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