(Requestor's Name)				
(Address)				
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(Ci	ty/State/Zip/Phone	e #)		
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Certified Copies	_ Certificates	s of Status		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

08 JUL -7 AM 9: 33

TO: New Filing Section Division of Corporations				
SUBJECT: Maxim Integrated Products, 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:				
Melissa A. Murry				
(Name of Person)				
Incorporating Services, Ltd.				
(Firm/Company)				
1540 Glenway Drive				
(Address)				
Tallahassee, FL 32301				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Melissa at () 656-7956				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$\sum \text{\$78.75 Filing Fee & Certificate of Status}\$\$ Certified Copy \$87.50 Filing Fee, 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. Maxim In	tegrated Products, Inc.		<u></u>
	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"	,
,	, , , , , , , , , , , , , , , , , , , ,		
 	,		
(If name unavai	lable in Florida, enter alternate corporate nam	• • • •	business in Florida)
_{2.} Delaware		94-2896096	<u>-</u>
,	under the law of which it is incorporated)	(FEI number, if applic	able)
4. August 19		_{s.} perpetual	
·	e of incorporation)	(Duration: Year corp. will cease to e	xist or "perpetual")
_{6.} January 1			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)
_{7.} 120 San G	Gabriel Drive, Sunnyvale, CA	\ 94086	
	(Principal office ac	ldress)	· · · · · · · · · · · · · · · · · · ·
120 San C	Gabriel Drive, Sunnyvale, CA	A 94086	
	(Current mailing ac	ldress)	· · · · ·
A mar lancation	al a asia disa		
8. Any lawfu	s) of corporation authorized in home state or	country to be comised out in state of Elevi	40. 27
• •	•	•	80 80
9. Name and street	et address of Florida registered agent: (P	O. Box NOT acceptable)	The simple of
Name:	Business Filings Incorpora	ated	JUL -7
Office Address:	1203 Govenors Square Bl	vd, Suite 101	ma ≥ m
	Tallahassee	, Florida 32301-2960	9: 3 10R
	(City)	(Zip code)	TOA
10. Registered a	gent's acceptance:		-
Having been nan	ned as registered agent and to accept ser		
-	s application, I hereby accept the appoin comply with the provisions of all statutes		
	r with and accept the obligations of my p		bergermance of my andees
E	Business Filings Incorporated		
c	and and Minta	and Control	Ω
	Registered agent's signature	M. Durana A	<u>5</u> L
B	awares Filings and	constated "	
11. Attached is a	certificate of existence duly authenticated	d, not more than 90 days prior to delive	very 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.

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.

·	Maxim Integrated Products, Inc.				
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Corp," "Inc," "Corp," or "Corp.")					
	·		·		
(If name unavai	lable in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business in Florida)		
2. Delaware		3.	94-2896096		
(State or country	under the law of which it is incorporated)	_ •	(FEI number, if applicable)		
August 19,	1987	5.	perpetual		
· · · · · · · · · · · · · · · · · · ·	e of incorporation)	•	(Duration: Year corp. will cease to exist or "perpetual")		
_{6.} January 1, 2	2004				
	•		n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
, 120 San Gal	briel Drive, Sunnyvale, CA 940	086	5		
· ·	(Principal office	add	iress)		
120 San Ga	briel Drive, Sunnyvale, CA 940	086	6		
	(Current mailing	add	fress)		
			9		
8. (Purpose)	s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)		
	•				
9. Name and stree	et address of Florida registered agent: ((P.C	D. Box NOT acceptable)		
Name:	Business Filings Incorporate	d			
Office Address:	1203 Governors Square Blvd	l, S	uite 101		
	Tallahassee		. Florida 32301-2960 📛 :		
	(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.

Business Filings Incorporated

By: Brund Moiarth asst. Secretary

(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:

FILED SECRETARY OF STATE BIVISION OF CORPORATIONS

A. DIRECTORS	JIVISION OF CORPORATIONS
Chairman: See Exhibit A	08 JUL -7 AM 9: 33
Address:	
Vice Chairman:	
Address:	
Director:	· · · · · · · · · · · · · · · · · · ·
Address:	
Director:	
Address:	
B. OFFICERS	
President: See Exhibit A	
Address:	
Vice President:	
Address.	•
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the applic	cation listing additional officers and/or directors.
13. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	number 12 of the application)
Mark Casper, Secretary	
(Typed or printed name and capacity of	person signing application)

Exhibit A

Maxim Integrated Products

FILED SECRETARY OF STATES DIVISION OF CORPORATIONS

08 JUL -7 AM 9: 34

120 San Gabriel Drive Sunnyvale, CA 94086

120 San Gabriel Drive Sunnyvale, CA 94086

Officers		08 JUL -7
Name	<u>Title</u>	Address
Tunç Doluca	President and Chief Executive Officer	120 San Gabriel Drive Sunnyvale, CA 94086
Richard Hood	Vice President	120 San Gabriel Drive Sunnyvale, CA 94086
Bruce Kiddoo	Vice President of Finance	120 San Gabriel Drive Sunnyvale, CA 94086
Matthew J. Murphy	Vice President of Worldwide Sales	120 San Gabriel Drive Sunnyvale, CA 94086
Christopher J. Neil	Division Vice President	120 San Gabriel Drive Sunnyvale, CA 94086
Pirooz Parvarandeh	Group President	120 San Gabriel Drive Sunnyvale, CA 94086
Charles G. Rigg	Senior Vice President of Administration, General Counsel	120 San Gabriel Drive Sunnyvale, CA 94086
Vijay Ullal	Group President	120 San Gabriel Drive Sunnyvale, CA 94086
Mark Casper	Secretary	120 San Gabriel Drive Sunnyvale, CA 94086
Directors		
Name		Address
B. Kipling Hagopian		120 San Gabriel Drive Sunnyvale, CA 94086
James R. Bergman		120 San Gabriel Drive Sunnyvale, CA 94086
Joseph R. Bronson		120 San Gabriel Drive Sunnyvale, CA 94086

Doluca Tunç

A. R. Frank Wazzan

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MAXIM INTEGRATED PRODUCTS, 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 JUNE, A D 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAXIM INTEGRATED PRODUCTS, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF AUGUST, A.D. 1987.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

08 JUL -7 AM 9: 34

SECRETARY OF STATE

2135378 8300 080736957



Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 6693441

DATE: 06-27-08