

F12000002703

Florida Department of State
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To: Division of Corporations
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FOREIGN PROFIT/NONPROFIT CORPORATION
Mellanox Technologies, Inc

Certificate of Status	0
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: MELLANOX TECHNOLOGIES, 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," or "Certificate of Good Standing" 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:

DIANE PARKE

Name of Person

MELLANOX TECHNOLOGIES, INC.

Firm/Company

350 OAKMEAD PARKWAY, SUITE 100

Address

SUNNYVALE, CA 94085

City/State and Zip code

diane@mellanox.com and also to mgloss@mellanox.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DIANE PARKE

at (408) 916-0037

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 ☐ \$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. MELLANOX TECHNOLOGIES, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CALIFORNIA

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. MARCH 5, 1999

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 350 OAKMEAD PARKWAY, SUITE 100, SUNNYVALE, CA 94085

(Principal office address)

350 OAKMEAD PARKWAY, SUITE 100, SUNNYVALE, CA 94085

(Current mailing address)

8. TO PROVIDE END TO END CONNECTIVITY SOLUTIONS

(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 NOT acceptable)

Name: **CT Corporation System**

Office Address: **1200 South Pine Island Road**

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.

CT Corporation System

By:

Connie Bryan

(Registered agent's signature)

Connie Bryan

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.

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

A. DIRECTORS

Chairman: EYAL WALDMAN

Address: 350 OAKMEAD PARKWAY, SUITE 100, SUNNYVALE, CA 94085

Vice Chairman: N/A

Address: _____

Director: IRWIN FEDERMAN

Address: 350 OAKMEAD PARKWAY, SUITE 100, SUNNYVALE, CA 94085

Director: AMAL JOINSON

Address: 350 OAKMEAD PARKWAY, SUITE 100, SUNNYVALE, CA 94085

B. OFFICERS

President: EYAL WALDMAN

Address: 350 OAKMEAD PARKWAY, SUITE 100, SUNNYVALE, CA 94085

Vice President: N/A

Address: _____

Secretary: ALAN MENDELSON

Address: c/o LATHAN & WATKINS, LLP, 140 SCOTT DRIVE, MENLO PARK, CA 94025

Treasurer: MICHAEL GRAY, CHIEF FINANCIAL OFFICER

Address: 350 OAKMEAD PARKWAY, SUITE 100, SUNNYVALE, CA 94085

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

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §.817.153, F.S.

14. MICHAEL GRAY, CHIEF FINANCIAL OFFICER

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

FILED
2 JUN 18 AM 10:10
TALLAHASSEE, FLORIDA

**State of California
Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME:

MELLANOX TECHNOLOGIES, INC.

FILE NUMBER: C2155872
FORMATION DATE: 03/05/1999
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

FILED
12 JUN 28 AM 10:10
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of June 27, 2012.

Debra Bowen

**DEBRA BOWEN
Secretary of State**