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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

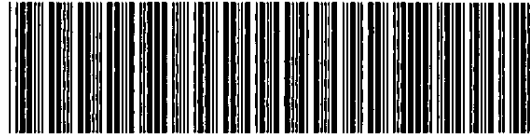
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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J. Shivers JUL 09 2012

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** ZEHNDER COMMUNICATIONS, 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:

Lynn Rose

Name of Person

c/o Phelps Dunbar, LLP

Firm/Company

365 Canal Street, Suite 2000,

Address

New Orleans, Louisiana 70130-6534

City/State and Zip code

carolt@z-comm.com or jzehnder@z-comm.com

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

For further information concerning this matter, please call:

Lynn Rose

Name of Person

at ( 504 ) 566-1311 (ext 1434)

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

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TALLAHASSEE FLORIDA

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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 REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. ZEHNDER COMMUNICATIONS, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. LOUISIANA 3. 72-1324835  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/14/1996 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. August 1, 2012  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 650 Poydras Street, Suite 2450, New Orleans, LA 70130  
(Principal office address)

650 Poydras Street, Suite 2450, New Orleans, LA 70130  
(Current mailing address)

8. marketing, advertising, and public relations  
(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)

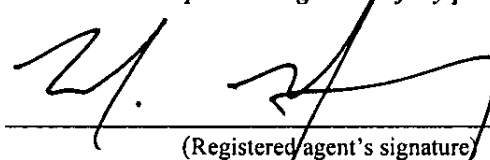
Name: Michael H. Ashy c/o Phelps Dunbar, LLP

Office Address: 100 South Ashley Drive, Suite 1900

Tampa, Florida 33602-5311  
(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.*

  
(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.

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

**A. DIRECTORS**

Chairman: Jeffrey S. Zehnder

Address: 650 Poydras Street, Suite 2450, New Orleans, LA 70130

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

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

Director: Shea Duet

Address: 650 Poydras Street, Suite 2450, New Orleans, LA 70130

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: Jeffrey S. Zehnder

Address: 650 Poydras Street, Suite 2450, New Orleans, LA 70130

Vice President: Michael C. Rainey

Address: 650 Poydras Street, Suite 2450, New Orleans, LA 70130

Secretary: Carol Tamporello

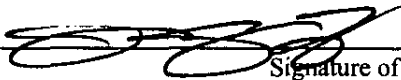
Address: 650 Poydras Street, Suite 2450, New Orleans, LA 70130

Treasurer: Jeffrey S. Zehnder

Address: 650 Poydras Street, Suite 2450, New Orleans, LA 70130

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

13. \_\_\_\_\_



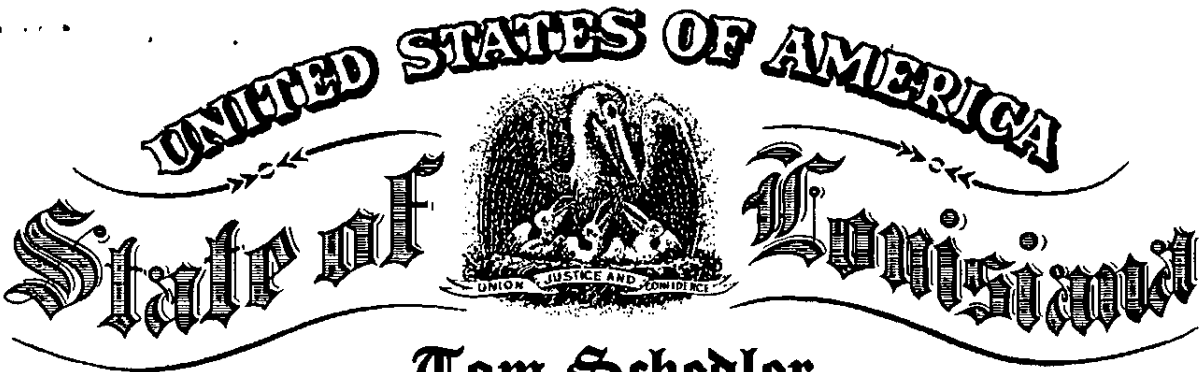
Signature of Director or Officer

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 s.817.155, F.S.

14. Jeffrey S. Zehnder, Chief Executive Officer

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

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TALLAHASSEE, FLORIDA



**Tom Schedler**  
SECRETARY OF STATE

*As Secretary of State of the State of Louisiana I do hereby Certify that*

the Articles of Incorporation of

**ZEHNDER COMMUNICATIONS, INC.**

Domiciled at NEW ORLEANS, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation was issued on May 14, 1996,

I further certify that no Certificate of Dissolution has been issued.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

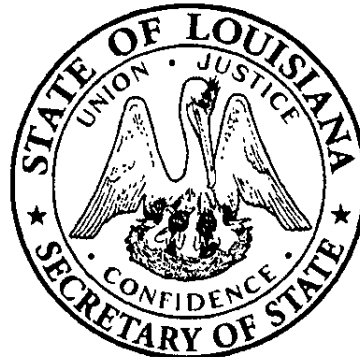
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In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

July 3, 2012

*Secretary of State*

Web 34527068D



Certificate ID: 10287577#N8Q83

To validate this certificate, visit the following web site, go to **Commercial Division, Certificate Validation**, then follow the instructions displayed.  
[www.sos.louisiana.gov](http://www.sos.louisiana.gov)