

ACCOUNT NO. : 072100000032

REFERENCE

: 743595

4392335

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE: June 23, 2000

ORDER TIME : 11:52 AM

ORDER NO. : 743595-010

CUSTOMER NO: 4392335

CUSTOMER: Ms. Marian Gustafson

Kirkpatrick & Lockhart Llp 1251 Avenue Of The Americas

45th Fl.

New York, NY 10020-2195

FOREIGN FILINGS

NAME:

ARTESYN COMMUNICATION

PRODUCTS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

000003304520--4

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

			(Name of foreig	n lim	ited liability company)	 '
Delaware	=			3.	52-2243262	
Jurisdiction u company is or	inder the law ganized)	of which foreig	n limited liability	7	(FEI number, if applicable)	
June 1, 20	000 .			5.	perpetual	8
	(Date of Org	anization)			(Duration: Year limited liability companywexist or "perpetual")	ill cease to
	July 1,		-			6
	(Date first	ransacted busin	ess in Florida. (S	See se	ections 608.501, 608.502, and 817.155, F.S.)	配 3
8310 Exce	lsior Driv	e, Madison,	WI 53717	-		126 PH 3: E
						器。
			(Street addre	ss of	principal office)	
[f]limited li	iability con	nany is a ma	mager-manage	ed co	ompany, check here	
		1	·O	••	······································	
The name a	and usual b	usiness addre	sses of the ma	anag	ing members or managers are as follov	vs:
		See 50	hedule A at	-+	. And	
			nedule A at	Lac	ned	
		0.11.				
						
	n original certi	ficate of existen	ce no more than (90 đạ	ys old, duly authenticated by the official having o	nictority of more
Attached is an					s not acceptable. If the certificate is in a foreign la	
	ider the law of	WILLIAM ILES OF PA	HIZEO, TALDOOOC	UUVE		
jurisdiction un			nized. (A photoc nslator must be st		ted.)	8 .8.,
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jurisdiction un uslation of the c . Nature of	business of descriptions of the systems Signature (In the system)	purposes to purposes to nature of a maccordance with saffirmation under	be conducted Characteristics and a section 608,408(3)	or prautho, F.S.,	prized representative of a member. the execution of this document constitutes that the facts stated herein are true.)	

Artesyn Communication Products, LLC Schedule A

List of Managers

Name	Address	<u>Title</u>
Joseph M. O'Donnell	7900 Glades Road Suite 500 Boca Raton, FL 33434	Chairman and Chief Executive Officer
Robert Aebli	8310 Excelsior Drive Madison, WI 53717	President
Richard J. Thompson	7900 Glades Road Suite 500 Boca Raton, FL 33434	Vice President and Secretary

OO JUN 26 PM 3: 08
SECRETAINS OF STATE

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
ARTESYN COMMUNICATION PRODUCTS, LLC	æ
2. The name and the Florida street address of the registered agent and office are:	
Corporation Service Company	
(Name)	
Florida street address (P.O. Box NOT ACCEPTABLE)	
Tallahassee FL 32301 City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointmental registered agent and agree to act in this capacity. I further agree to comply with the provisions of attended accept the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Which will be accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. (Signature)	

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional)

5.00

\$ 25.00 Designation of Registered Agent

Certificate of Status (optional)

State of Delaware

Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARTESYN COMMUNICATION PRODUCTS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF JUNE, A.D. 2000

00 JUN 26 PM 3: 08
SECKETARY OF STATE
ANALYSEF FLORIDA



Edward J. Freel, Secretary of State

AUTHENTICATION:

0510115

DATE: 06-20-00

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