

# M00000000 1791

Document Number Only

C T CORPORATION SYSTEM

Requestor's Name  
660 East Jefferson Street

Address  
Tallahassee, FL 32301 (850)222-1092  
City State Zip Phone

CORPORATION(S) NAME

MJH

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\*\*\*\*125.00 \*\*\*\*125.00

Milgo Solutions, LLC

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DIVISION OF CORPORATIONS  
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|---|---|---|
| <input type="checkbox"/> Profit                               | <input type="checkbox"/> Amendment                  | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> NonProfit                            | <input type="checkbox"/> Dissolution/Withdrawal     | <input type="checkbox"/> Mark               |
| <input checked="" type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Annual Report              | <input type="checkbox"/> Other              |
| <input checked="" type="checkbox"/> Foreign                   | <input type="checkbox"/> Reservation                | <input type="checkbox"/> Change of R.A.     |
| <input type="checkbox"/> Limited Partnership                  | <input type="checkbox"/> Photo Copies               | <input type="checkbox"/> Fictitious Name    |
| <input type="checkbox"/> Reinstatement                        |   | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Limited Liability Partnership        |   |   |
| <input type="checkbox"/> Certified Copy                       |   |   |
| <input type="checkbox"/> Call When Ready                      | <input checked="" type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In                   | <input type="checkbox"/> Will Wait                  | <input checked="" type="checkbox"/> Pick Up |
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CONNIE BRYAN

File 2<sup>nd</sup>

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

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

1. MILGO SOLUTIONS, LLC  
(Name of foreign limited liability company)
2. DELAWARE  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 59-1762746  
(FEI number, if applicable)
4. MAY 25, 2000  
(Date of Organization)
5. PERPETUAL  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Qualification  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 1619 NORTH HARRISON PARKWAY, SUNRISE, FLORIDA 33323  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

9. The usual business addresses of the managing members or managers are as follows:

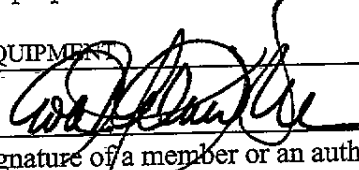
EVA M. KALAWSKI, 2049 CENTURY PARK EAST, LOS ANGELES, CA 90067

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10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: MANUFACTURER OF DATA

COMMUNICATIONS EQUIPMENT

  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

EVA M. KALAWSKI

Typed or printed name of signee

**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:

MILGO SOLUTIONS, LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

(Name)

1200 South Pine Island Road

Florida street address (P.O. Box NOT ACCEPTABLE)

Plantation

FL

33324

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 appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to 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..*

*Connie Bryan*

(Signature)

**CONNIE BRYAN**  
**SPECIAL ASSISTANT SECRETARY**

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	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 "MILGO SOLUTIONS, 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 FIFTH DAY OF JULY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



A handwritten signature in cursive script, reading "Edward J. Freel".

*Edward J. Freel, Secretary of State*

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AUTHENTICATION: 0540047

DATE: 07-05-00