#### XENCOM FACILITY MANAGEMENT 1609 PRECISION DR. STE. 3000 PLANO, TX 75074

City/State/Zip

Phone #

Office Use Only

Examiner's Initials

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1(Corporation Name)  2(Corporation Name)  3(Corporation Name)	(Document #)  (Document #)	FILED  00 DEC 26 PM 3: 42  SECRETARY OF STATE TALLAHASSEE, FLORIDA
4. (Corporation Name)  Walk in Pick up time  Mail out Will wait	(Document #)  Photocopy	Certified Copy  Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS	AMENDMENTS  Amendment Resignation of R.A Change of Registe Dissolution/Withd Merger  REGISTRATION/OR	lrawal
Annual Report Fictitious Name	Foreign Limited Partnershi Reinstatement Trademark Other	

CR2E031(7/97)

## 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:

. XENÇOM FACILITY M	ANAGEMENT LLC (Name of foreign li	imited liability company)	
TEXAS	2	3 75_2740372	
(Jurisdiction under the law of whi company is organized)	ch foreign limited liability	3. <u>75-2740372</u> (FEI number, if app	licable)
12-29-97 (Date of Organizat		PERPETUAL (Duration: Year limited liability cexist or "perpetual")	company will cease to
1/2/01			
(Date first transac	ted business in Florida. (See	sections 608.501, 608.502, and 817.1	55, F.S.)
609 PRECISION DR.	SUITE 3000		
PLANO, TX 750	74		-1,0 <b>9</b>
	(Street address	of principal office)	ELG.
If limited liability company	is a manager-managed	company, check here 🗓	FILED DEC 26 PM RETARY OF A ANASSEE, F
The usual business address	es of the managing mem	bers or managers are as follows	SEP PO
1609	-PRECISION DR. S	SUITE 3000	0F.00/
PLANC	), TX 75074		>
Attached is an original certificate jurisdiction under the law of which slation of the certificate under oath	hit is organized. (A photocopy	days old, duly authenticated by the offic y is not acceptable. If the certificate is in nitted.)	rial having custody of record a foreign language, a
Nature of business or purp	ooses to be conducted or	promoted in Florida:	
	Milala	SERVICES IN SHOPPING	
(In accorda	ance with section 608.408(3), F.	thorized representative of a men S., the execution of this document constitution that the facts stated herein are true.)	
	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:	
Xencom Facility Management LLC	
2. The name and the Florida street address of the registered agent and office are:	<u></u>
C T Corporation System	
(Name)	——————————————————————————————————————
	SE O
1200 South Pine Island Road	三 品 用
Florida street address (P.O. Box NOT ACCEPTABLE)	ILE IC 26 JARYO
Plantation FL 33324	型 里口
City/State/Zip	3: 42 TATE ORIDA
Having been named as registered agent and to accept service of process for the above s liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the process relating to the proper and complete a reference of the proper and complete and the proper and complete a reference of the proper and complete and the proper and complete a reference of the proper and complete and the proper and complete a reference of the proper and complete and the proper and complete a reference of the proper and complete and the proper and the proper and the proper and the proper and	mant as

elating 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..

SPECIAL ASSISTANT SECRETARY

Filing Fee for Application \$ 100.00 Designation of Registered Agent \$ 25.00 30.00 **Certified Copy (optional) Certificate of Status (optional)** 5.00



# The State of Texas

SECRETARY OF STATE

IT IS HEREBY CERTIFIED that Articles of Organization of

XENCOM FACILITY MANAGEMENT LLC File No. 7032562-22

were filed in this office and a certificate of organization was issued to this limited diability company, and no certificate of dissolution is in effect and the company is currently in existence.

C 26 PN 3: 42
TARY OF STATE
NASSEE FI ORIDA



IN TESTIMONY WHEREOF, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 11, 2000.

Elton Bomer Secretary of State

DAE