CT CORPORATION SYSTEM

CORPORATION(S) NAME	MOLOCO	UUM	47
EXI Parsons Telecom LLC			
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() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark	
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Verifier W.P. Verifier		Amount: \$	
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Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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:

1	EXi Parsons Telecom LLC			-
	(Name of foreign limited liability company)	_	-	. 3
2.				31
	(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)		-	
4.	March 1, 2001 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to		_	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")			
6.	September, 2001			
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)			
7.	15770 North Dallas Parkway, Suite 500, Dallas, Texas 75248			
			-	
	(Street address of principal office)			
0		7		
8.	. If limited liability company is a manager-managed company, check here	Ŕ		2
9.	The usual business addresses of the managing members or managers are as follows:	5 ₽ ¥	_	FA
	4701 Hedgemore Drive, Charlotte, North Carolina 28209, U.S.A.	AU.	R	
	4th Floor, AIB Investment House, Percy Place, Dublin 4, Republic of Ireland	NIVI.	2: 50	
	P .			
			-	
			-	·
tine). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody o e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, anslation of the certificate under oath of the translator must be submitted.)	ofre a	cords	in
11	1. Nature of business or purposes to be conducted or promoted in Florida: the installation and testing of			
	telephone switches and related work		•	
	Op 1		.•	
	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.)			

Curtis A. Bower, Exec. Vice President, Parsons Communications Group Inc.,

Member

Typed or printed name of signee

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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	e of the Limited Liab	bility Company is:	
EXi Parsons T	elecom LLC		
2. The name	and the Florida stree	et address of the registered agent and office are:	,
	C T Corporation Sys	stem	
		(Name)	•
		System, 1200 South Pine Island Road la street address (P.O. Box NOT ACCEPTABLE)	.
	Plantation	FL 33324 City/State/Zip	
liability compo agent and agre relating to the	any at the place designee to act in this capac proper and complete my position as registe	gent and to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as registered city. I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and accept the ered agent as provided for in Chapter 608, F.S DAVID I. FARBER ASSISTANT SECRETARY	· · · · · · · · · · · · · · · ·
	(Signature)		T 4

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\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

\$ 25.00 Designation of Registered Agent

State of Delaware Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EXI PARSONS TELECOM 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. 2001.

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

OF JUL 11 PM 2: 50
SECRETARY OF STATE
FALLAMASSEE, FLORIDA

Warriet Smith Windson Secretary of State

AUTHENTICATION: 1228301

DATE: 07-05-01

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