

M06000001098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

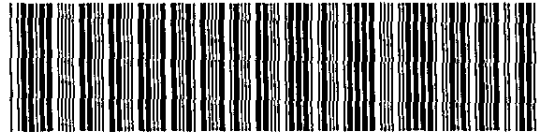
(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANYSM

1201 Hays Street
Tallahassee, FL 32301
850-521-1000
850-521-1010(fax)

Account Number: 072100000032

Order # 8843491005
Client Account Number: _____

Cost Limit: \$125,000
Authorization: [Signature]

Contact: Amanda Hadden ext 2955

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporation Name(s) & Document number(s)

- 1) Outerbridge Networks LLC
- 2) _____
- 3) _____
- 4) _____

☒ Stamped Copy ☐ Certified Copy

Type of Filings:

<u>New Filings</u>	<u>Amendment</u>	<u>Qualification</u>
<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Profit
<input type="checkbox"/> NFP	<input type="checkbox"/> COA	<input type="checkbox"/> NFP
<input type="checkbox"/> LLC	<input type="checkbox"/> Dissolution/Withdrawal	<input checked="" type="checkbox"/> LLC
<input type="checkbox"/> LTD	<input type="checkbox"/> Merger	<input type="checkbox"/> LTD

Other:

☐ Annual Report ☐ Fictitious Name ☐ Reinstatement

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. OUTERBRIDGE NETWORKS LLC
(Name of Foreign Limited Liability Company)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 20-4354183
(FEI number, if applicable)
4. 02/22/2006
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon registration
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. c/o Isaac Foster, 1901 S. Harbor City Blvd., Suite 640, Melbourne, FL 32901

(Street Address of Principal Office)

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

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

Melbourne Partners LLC, 1901 S. Harbor City Blvd., Suite 640 Melbourne, FL 32901

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:

Providing innovative network equipment to the cable industry.

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.)

Isaac Foster, Member of Melbourne Partners LLC, the Manager

Typed or printed name of signee

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2006 FEB 23 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.413 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:

OUTERBRIDGE NETWORKS LLC

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

Isaac Foster

(Name)

1901 S. Harbor City Blvd., Suite 640

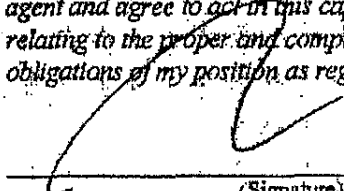
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Melbourne

FL 32901

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, Florida Statutes.


(Signature)

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

Delaware

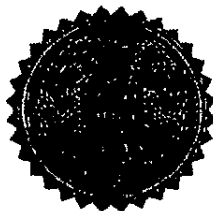
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OUTERBRIDGE NETWORKS 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 TWENTY-THIRD DAY OF FEBRUARY, A.D. 2006.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OUTERBRIDGE NETWORKS LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2006.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

4113582 8300

AUTHENTICATION: 4543095

060171561

DATE: 02-23-06