# M10000002467

| (Red                      | questor's Name)   |             |
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| Certified Copies          | Certificates      | of Status   |
| Special Instructions to F | Filing Officer:   |             |
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Office Use Only

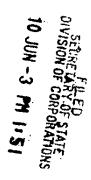


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B. KOHR
JUN - 3 2010

EXAMINER





10 UM 3 A 1.5.

| ACCOUNT | NO. | : | I20000000195 |
|---------|-----|---|--------------|
|         |     |   |              |

REFERENCE : 403544

0<u>3</u>544**,** 77104.

AUTHORIZATION :

COST LIMIT : \$ 125.0

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| <br> |   |  |
|      |   |  |
|      |   |  |

ORDER DATE: June 3, 2010

ORDER TIME : 9:27 AM

ORDER NO. : 403544-010

CUSTOMER NO: 7710495

#### FOREIGN FILINGS

NAME: TELMATE, LLC

XXXX QUALIFICATION (TYPE: LL)

| PLEASE | RETURN | THE  | FOLLOWING | AS | PROOF | OF | FILING: |
|--------|--------|------|-----------|----|-------|----|---------|
|        | CERTIF | CETS | COPY      |    |       |    |         |

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina Dunlap -- EXT# 2962

EXAMINER:

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

REIGN

| IN CONTUNEL WITH SECTION BUSING, FLORIDA STATE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TE   | HES, THE FULLOWING IS SUBMITTED TO REGISTER A FOREIGH<br>HE STATE OF FLORIDA:  |
|---|--|
| 1. TELMATE, LLC   |  |
| (Name of Foreign Limited Liability Company; must inc  | clude "Limited Liability Company," "L.L.C.," or "LLC.")  |
|   | pose of transacting business in Florida and attach a copy of the written<br>ternate name. The atternate name must include "Limited Liability |
| 2. Delaware   |  |
| (Jurisdiction under the law of which foreign limited liability company is organized)  | (FEI number, if applicable)  |
| 4. 06/08/2009   | 5. perpetual   |
| (Date of Organization)  | (Duration: Year limited liability company will cease to exist or "perpetual")  |
| <sub>6.</sub> June 15th, 2010   |  |
| (Date first transacted business in F<br>(See sections 608.501 & 608.502 F.S   | lorida, if prior to registration.)<br>S. to determine penalty liability)   |
| 7. 1108 S.E. 6th Street, Ontario, OR 97914  |  |
| (Street Address  If limited liability company is a manager-managed  | i of Principal Office)   |
| . The name and usual business addresses of the man  | naging members or managers are as follows:   |
| Richard Torgersrud, 1108 SE 6th Street, O   | ntario, OR 97914   |
| Kevin O'Neil, 1108 SE 6th Street, Ontario,  | OR 97914   |
| e juristiction under the law of which it is organized. (A photocopy<br>anslation of the certificate under eath of the translator must be subm |  |
|   | thorized representative of a member. S., the execution of this document constitutes try that the facts stated herein are true.)              |
| to-tet0:  | Durrenhallaca  |
| 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.

| FLORIDA.   |  |   |
|--|--|---|
| 1. The name  | c of the Limited Liabili   | ty Company is:  |
| TELMAT   | E, LLC   | ·   |
| If name una  | vailable, the alternate n  | ame to be used in the state of Florida is:  |
| 2. The name  | e and the Florida street   | address of the registered agent and office are:   |
|  | Corporation Ser  | vice Company  |
|  |  | (Name)  |
|  | 1201 Hays Stree  | et  |
|  | Florida S  | Street Address (P.O. Box NOT ACCEPTABLE)  |
|  | Tallahassee  | FL 32301  |
|  |  | City/State/Zip  |
| liability comp<br>agent and agr<br>relating to the<br>obligations of<br>Corporatio | nany at the place designare to act in this capacity of proper and complete po my position as register on Service Company | ent and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as registered y. I further agree to comply with the provisions of all statutes verformance of my duties, and I am familiar with and accept the ed agent as provided for in Chapter 608, Florida Statutes.  Carina L. Dunlap  Asst. Vice President |
|  | \$   | 100.00 Filing Fee for Application 25.00 Designation of Registered Agent 30.00 Certified Copy (optional) 5.00 Certificate of Status (optional)   |

## Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TELMATE, 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 SECOND DAY OF JUNE, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TELMATE, LLC" WAS FORMED ON THE NINTH DAY OF JUNE, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

TAY'S OF THE PARTY OF THE PARTY

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Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 8030858

DATE: 06-02-10