# M14000007035

(Requestor's Name)
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### FLORIDA FILING & SEARCH SERVICES, INC.

### P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

9/30/14

NAME:

M5 NETWORKS, LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### **COVER LETTER**

TO:

ro:	Registration Section Division of Corporations			•			
SUBJE	CCT: M5 NETWORKS	, LLC Name of Limi	ted Liability Company				
nei	-fored Barrellonder by Prost			Passas Dusiness in Florida	" Cartificate of		
i ne end Existen	ciosed "Application by Forei ice, and check are submitted	gn Limited Liability Comp to register the above refere	enced foreign limited liabi	lity company to transact bus	iness in Florida		
Please :	return all correspondence co	ncerning this matter to the	following:				
	David Nelson						
		Na	me of Person		•		
	ShoreTel, Inc.		Name of Person  Firm/Company  Address  City/State and Zip Code  be used for future annual report notification)  call:  at (408				
	,						
960 Stewart Drive  Address  Sunnyvale, CA 94085							
	<del> </del>	Address					
	Sunnyvale, C	A 94085					
		City/Str	ate and Zip Code		•		
	dnelson@sho				_		
	E	-mail address: (to be used	for future annual report n	otification)			
For fur	ther information concerning	this matter, please call:					
	David Nelson		at ( 408 ) 90	0-1229			
	Name of	Person	Area Code Da	ytime Telephone Number	_		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Es	n of Corporations ation Section Building secutive Center Circle				
Enclo	sed is a check for the fo  \$125.00 Filing Fee	llowing amount:  ☐ \$130.00 Filing Fee &  Certificate of Status	_				



September 30, 2014

FLORIDA FILING & SEARCH SERVICES, INC. ATTN: ABBIE HODGE

SUBJECT: M5 NETWORKS, LLC Ref. Number: W14000059577

We have received your document for M5 NETWORKS, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch Regulatory Specialist II

Letter Number: 014A00020858

2814 SEP 30 FM 4: 2

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: M5 NETWORKS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 2. DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 960 Stewart Drive Sunnyvale, CA 94085 (Street Address of Principal Office) 6. 960 Stewart Drive Sunnyvale, CA 94085 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: SHORETEL, INC. - MEMBER

8. 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.)

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Michael Healy, CFO

960 Stewart Drive

Sunnyvale, CA 94085

Typed or printed name of signee

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 Lim	ned Liability Compan	y is:			
M5 NETWORKS, LLC	>				
If unavailable, the altern	ate to be used in the st	ate of Florida is	:		
2. The name and the Flo	orida street address of	the registered ag	ent and office are:	SE TAL	•
National Corporate Research, Ltd., Inc. (Name)					
	14 SEP 29 PM 4: 45 SECRETARY OF STATE ALLAHASSEE. FLORIDA				
Florida Street Address (P.O. Box NOT ACCEPTABLE)					O
	Tallahassee	FL	32301		

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 605, Florida Statutes.

Kurtie believer, asst. Lecretary

\$ 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, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "M5 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-SIXTH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "M5 NETWORKS, LLC" WAS FORMED ON THE THIRTIETH DAY OF JANUARY, A.D. 2012.

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

14 SEP 29 PH L: LS
SECRETARY OF STATE
TALLAHASSEF, FI OBIO

5102572 8300

141228835

AUTHENTYCATION: 1734957

DATE: 09-26-14

Jeffrey W. Bullock, Secretary of State

You may verify this certificate online at corp.delaware.gov/authver.shtml