M6000001317-

(Requestor's Name)								
(Address)								
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(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
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DEPARTMENT OF STATE

FEB 1 8 2016 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 017578 4800163

AUTHORIZATION : Carelo Blend

COST LIMIT : \$125.00

ORDER DATE: February 15, 2016

ORDER TIME : 3:04 PM

ORDER NO. : 017578-105

CUSTOMER NO: 4800163

FOREIGN FILINGS

NAME: COMMSCOPE CONNECTIVITY

SOLUTIONS LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

	Registration Section Division of Corporations						
SUBJEC	CommScope Connectivity Solutions LLC						
SOBJEC	Name of Limited Liability Company						
The enclo Existence	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.						
Please re	turn all correspondence concerning this matter to the following:						
	C. Helfrich						
	Name of Person						
	Baker & McKenzie LLP						
Firm/Company							
	300 East Randolph Street, Suite 5000						
Address							
	Chicago, IL 60601						
	City/State and Zip Code						
	E-mail address: (to be used for future annual report notification)						
For furth	er information concerning this matter, please call:						
	Name of Contact Person Area Code Daytime Telephone Number						
,	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Clifton Building Fallahassec, FL 32314 Clifton Section Clifton Building Control Clifton Section Clifton Section Clifton Building Control Clifton Section Clifton Section Clifton Building Control Clifton Section Clifton Building Control Clifton Section Clifton Se						
Enclosed	is a check for the following amount: 2 \$125,00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certified Copy						

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

COMPANY TO TRANSACT BO	NAMESS IN THE STATE OF FLORIDA Vity Solutions LLC							
(Name of For	eign Limited Liability Company; mu	șt inclu	de "Limited Liab	ility Company." "L.I	C.," or "LLC.")	1		
Liability Company." "L.L.C.	Itemate name adopted for the purpose "or "LLC,")		-	s in Florida. The alter	nate name must i	nclude "	 Limited	
2. Minnesota	S. 12 L. C	3.	41-1903605	(FEI number, if ap	TP_EES			
company is organized)	of which foreign limited liability			(1:11 питоет, и ар	piicabie)			
4. 2/1/2016								
	(Date first transacted busine (See sections 605 0904 & 605.	55 m F 0905.	londa, 11 prior 10 F,S, 10 determine	registration.) penalty liability)				
5. 1100 CommScope Pla	ce SE							
Hickory, NC 28602								
	(Street Address of I	rincip:	d Office)					
6. 1100 CommScope Plac	e SE			- <u> </u>				
Hickory, NC 28602								
4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Mailing /	\ddres:	5)					
7. Name and street address	ss of Florida registered agent; (P.	O. Bo	x <u>NOT</u> accepta	ble)		****	5	•
. Name:	Corporation Service Company					2. r	£	ζ-
Office Address:	1201 Hays Street			•		in.		;
Office Address.	Tallahassee		· · ·	. 3730)			Ä	{~
	(City)			, Florida 3230) (Zin c	nde)	1 - 1 - 1	⊒ <u>r</u>	j .
Registered agent's accep	tance:	. ,		,		3 55	\circ	١,,,
	gistered agent and to accept serv tion, I hereby accept the appoint							
	ons of all statutes relative to the	oropei	and complete	performance of m	duties, and I	am fami	iliar wit	h an
ассері іне обиданону ој і	on position as registered agent. Corporation Service Compan	<u>y.</u>		Melice	a Zender			
	By: Remed	000 00	ent's signature)		e President			
	• • •	_						
•	icity and address of the person(s)	who h	as/have authori	ly to manage is/are:	:,			
Mark A. Olson, Manager					······································			
Frank B. Wyatt, II, Manag	ger							
Address for both: 11	100 CommScope Place SE,	Hick	ory, NC 286	502				
	of existence, no more than 90 day of which it is organized. (If the coubmitted) Signature	rtifica	te is in a forcig	n language, a transl				
	Signature	(o∐n a	uthorized person		•			
	I in accordance with section 605.0 of the Department of State constitu						on	
	Frank B. Wyatt, II, Manager							

Typed or printed name of signce

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: CommScope Connectivity LLC

Date Filed: 01/29/2016

File Number: 869996700061

Minnesota Statutes, Chapter: 322C

Home Jurisdiction: Minnesota

This certificate has been issued on: 02/15/2016

OF THE STATE OF TH

Oteve Pinn Steve Simon

Secretary of State
State of Minnesota