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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850) 205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Foreign Limited Liability Company Tropo LLC

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5/24/2016 10:42:09 AM From: To: 8506176383(2/4)

COVER LETTER

TO:	Registration Section Division of Corporati	ons			\$ CE
SUBJE	Tropo LLC				
SUBJE		Name of	Limited Liability Com	pany	
The end Existen	closed "Application by Foce, and check are submit	oreign Limited Liability Conqueted to register the above refer	pany for Authorization enced foreign limited l	to Transact Business in Florida," liability company to transact busin	Certificate of less in Florida
Please	return all correspondence	concerning this matter to the	following:		
	Patricia Posa	la			
		N	ame of Person		
	Fenwick & W	est LLP			
		J?	irm/Company		
	801 Californi	a St.			
			Address		
	Mountain Vic	ew, CA 94041			
		City/S	tate and Zip Code		:
	pposada@fcnw				
		E-mail address: (to be use	d for future annual rep	ort notification)	
For fur	ther information concern	ing this matter, please call:			
	Patricia Posada		650 £	335-7178	•
	Name	of Contact Person	Area Code	Daytime Telephone Number	
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314		Di Re Cl 26	REET ADDRESS: vision of Corporations egistration Section idea Building 61 Executive Center Circle illahassee, FL 32301	
Enclose	ed is a check for the follo	wing amount: \$\Boxed{\Omega} \\$130.00 \text{ Filing Fee & Certificate of Status}	☐ \$155.00 Filing F Certified Copy	ee & \$\Bigsigs \$160.00 Filing Fee, Co of Status & Certified Cop	

5/24/2016 10:42:09 AM From: To: 8506176383(3/4)

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

IN COMPLIANCE WITH SECTION 615/0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

14.1

, Tropo LLC	SIVES IN THE STATE OF FLORIDA	•						
(Name of Fore	ign Limited Liability Company; mus	t inclu	de "Limited Lish	ility Compa	ny," "L.L.C.," or	"LLC.")		
(If name unavailable, enter al Liability Company," L.L.C,	ternate name adopted for the purposi	of tra	nsacting business	in Florida.	The alternate nar	ne must i	nclude '	Limited
2. Delaware		3.	45-4204286					
(Jurisdiction under the law company is organized)	of which foreign limited liability		ann a marriada riada renda renda de de renna ante a de debida desde	(FEI num	ber, if applicable)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
4	(Date first transacted busine (See sections 605.0904 & 605.	ss in F	orida, if prior to	registration.	.)			
1970 BH MI		0905,	F.S. to determine	penalty liab	oility)			
5. 170 West Tasman Driv	e, San Jose, CA, 95134			nag jje poje na se nakon svoten silka silkadariša	Maddin and Charlest purposed in the September 1980 and the Capable	,		
***************************************	(Street Address of I	nncip	il Office)	ra wa mwana wa katao katao wa 12 a mailika ka	······································			
6. 170 West Tasman Drive	e San Jose CA 95134	·	-					
170 West Tasman Dr.								
and all and the second of Minister was also than the second company of the second compan	(Mailing A	Addres	5)		نجوت البكاء المنطقة لدامنتك أر يشتك المستخدم الجربيات	•••		
7. Name and street addres	s of Florida registered agent: (P.	O. Bo	x NOT accepts	ble)		Day.		
Name:	CT Corporation System	thermoders and a second					6 HA	: 49.2 _m
Office Address:	1200 South Pine Island Road	*** **********************************				法が	AY 2	esteration
	Plantation			, Florida	33324	SE	-BX	grantos T
	(0.0)		· · · · · · · · · · · · · · · · · · ·	,	(Zip code)	_m=	<u> </u>	
designated in this application to complywith the provision accept the obligations of n	gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. CT Corporation S	ment prope	as registered ag	ent and as	gree to act in th	is capac	iry. Y	urther agre
	(Regist	ered ag	ent's signature)					
8. The name, title or capa Mark T. Gorman	icity and address of the person(s)	who l	as/have authori	ty to mana	ige is'are:			
President & CEO			Madkan danim aksi dalah salah sa		quagas transa ar sao ar ann an ann tanaisse muiteachtaine	hydrigyyfilm dyw aw achirligh, dyw bahl	M444	
170 West Tasman Drive,	San Jose, CA, 95134						-	
9. Attached is a certificate jurisdiction under the law of the translator must be su	um Å a	ertifica	duly authenticate is in a foreig	n language	e, a translation o	custody of the cer	of reco	ords in the under oath
	Signature	of en a	uthorized person					
This document is executed submitted in a document to	l in accordance with section 605.0 the Department of State constitu Mark T. Gorman)203 (ites a t	l) (b), Florida S hird degree felo	tatutes. I a ny as prov	m aware that an ided for in s.817	y false ii 7.155, F.	nforma S.	tion

Typed or printed name of signee

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TROPO 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 MAY, A.D. 2016.

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

Authentication: 202368058

Date: 05-23-16

5078990 8300 SR# 20163608631

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