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Foreign Limited Liability Company RUCKUS WIRELESS LLC

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

## IN COMPLIANCE WITH SECTION 6050002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

## RUCKUS WIRELESS LLC

f name unavailable, enter attenuate i	name adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Li-	ability Company," "I. I. C." or "L.C."
Delaware		3	
2. (Junidiction under the law of which foreign limited liability company is organized)		3(FEI numb	er, if applicable)
Upon Filing			
·	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determin	gistration.) e penalty liability)	
3642 E. US Highway 70 5		6. <u>3642 E. US Highway 70</u> (Mailing Address)	
street Address of Principal Office)		(Mailing Address)	
	<u>847-87-87-</u>		<u> </u>
Claremont, NC 28610		Claremont, NC 28610	ECRE AR
. Name and <u>street addres</u>	is of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	United Agent Group Inc.		STAIE
Office Address:	801 US Highway 1		
	North Palm Beach	33408	

Registered agent's acceptance:

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 application. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Crin Saville (Registered agent's signature) Erin Saville, Special Secretary

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: Kyle D. Lorentzen	<b>■</b> Manager	Name:
Member	Address:	□Member	Address:
Authorized		Authorized	
Person	Claremont, NC 28610	Person	Claremont, NC 28610
■Other	Other	■Other	0ther
□Manager	Name:	Manager	Name:
Member	Address:	Member	Address:
Authorized		Authorized	
Person		Person	·
Other	Other	Other	Other
□Manager	Name:	□ Manager	Name:
□Member	Address:	Member	Address:
Authorized		□ Authorized	
Person	· · · · · · · · · · · · · · · · · · ·	Person	
Other	Other	Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, 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.





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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RUCKUS WIRELESS 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-FIFTH DAY OF JANUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RUCKUS WIRELESS LLC" WAS FORMED ON THE NINETEENTH DAY OF AUGUST, A.D. 2002.

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



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