

1499000002046

Document Number Only

C T Corporation System
Requestor's Name
660 East Jefferson Street
Address
Tallahassee, FL 32301 (850) 222-1092
City State Zip Phone

300003078359--2
-12/22/99--01027--024
****125.00 ****125.00

CORPORATION(S) NAME

Getronics Field Integrated Managed Services

FILED
99 DEC 22 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☐ Profit ☐ Amendment ☐ Merger
☐ NonProfit ☐ Dissolution/Withdrawal ☐ Mark
☒ Limited Liability Company ☐ Other
☒ Foreign ☐ Change of P.A.
☐ Limited Partnership ☐ Reservation ☐ Fictitious Name
☐ Reinstatement ☐ Photo Copies ☐ GUS / G/S
☐ Certified Copy ☐ Call if Problem ☐ After 4:30
☐ Call When Ready ☐ Will Wait ☒ Pick Up
☒ Walk In
☐ Mail Out

Name
Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

THANK YOU ! CONNIE BRYAN

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Getronics Field Integrated Managed Services, LLC
(Name of foreign limited liability company)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. Applied For
(FEI number, if applicable)
4. November 29, 1999
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification.
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 290 Concord Road, Billerica, MA 01821
(Street address of principal office)

FILED
99 DEC 22 PM 3:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA

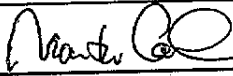
8. If limited liability company is a manager-managed company, check here ☐
9. The usual business addresses of the managing members or managers are as follows:

Getronics Wang Co., 290 Concord Road, Billerica, MA 01821

10. 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.)

11. Nature of business or purposes to be conducted or promoted in Florida: To provide multi vender services

To provide multi vender services for manufacturing, repair and maintenance of computer hardware and software, and to e.


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Grant Carlson

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.

1. The name of the Limited Liability Company is:

Getronics Field Integrated Managed Services LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

(Name)

c/o C T Corporation System, 1200 South Pine Island Road

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Plantation

FL 33324

City/State/Zip

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 608, F.S..

C T Corporation System

Amy Bertele H.
(Signature)

Amy Bertele H., Asst. Secy.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

FILED
99 DEC 22 PM 3:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA

State of Delaware
Office of the Secretary of State


PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GETRONICS FIELD INTEGRATED MANAGED SERVICES, 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 TWENTIETH DAY OF DECEMBER, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
99 DEC 22 PM 3:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA




Edward J. Freel, Secretary of State

3132386 8300

991548605

AUTHENTICATION: 0152034

DATE: 12-20-99