

STATE OF DELAWARE
CERTIFICATE OF FORMATION OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is **IETF Administration LLC**.
2. The Registered Office of the limited liability company in the State of Delaware is located at **16192 Coastal Highway**, in the City of **Lewes**, Zip Code **19958**. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is **Harvard Business Services, Inc.**
3. The purpose of the limited liability company is limited exclusively to such charitable, educational literary or scientific purposes as would qualify it for exemption from federal income tax as an organization described by Section 501(c)(3) of the Internal Revenue Code of 1986 (the "Code") or the corresponding provision of any future revision of the Code.

By: _____
Authorized Person

C. Bradford Biddle
Name: _____
Print or Type