

**EXHIBIT B**

**Authority to Transact Business**



Francine Giani  
Executive Director  
Department of Commerce

Gary Herbert  
Governor  
State of Utah

Kathy Berg  
Director  
Division of Corporations  
& Commercial Code

STATE OF UTAH  
DEPARTMENT OF COMMERCE  
*DIVISION OF CORPORATIONS & COMMERCIAL CODE*  
CERTIFICATE OF REGISTRATION

C T CORPORATION SYSTEM  
ONVOY, LLC  
1108 E SOUTH UNION AVE  
MIDVALE UT 84047

Access Code  
Code: 5241499



State of Utah  
Department of Commerce  
Division of Corporations & Commercial Code

**CERTIFICATE OF REGISTRATION**

**LLC - Foreign**

This certifies that **ONVOY, LLC** has been filed and approved on **November 03, 2011** and has been issued the registration number **8145393-0161** in the office of the Division and hereby issues this Certification thereof.

KATHY BERG  
Division Director

\*The Access Code is used for Online Applications used by this Division only.



State of Utah  
 Department of Commerce  
 Division of Corporations & Commercial Code  
 Foreign Registration Statement (Foreign Limited Liability Company)

This form must be type written or computer generated.

**CONVERSION**

Important: Read instructions before completing form

Non-Refundable Processing Fee: \$70.00

1. Exact Name of Foreign Limited Liability Company:		Onvoy, LLC			
2. Jurisdiction of Formation:		MN			
3. Principal office address:		10300 6th Ave N, Plymouth MN 55441			
		Address	City	State	Zip
4. The name of the Registered Agent (Individual or Business Entity or Commercial Registered Agent): C T Corporation System ID# 7140008-0250 <i>The address must be listed if you have a non-commercial registered agent. See instructions for further details.</i> Address of the Registered Agent: _____ Utah Street Address Required, PO Boxes can be listed after the Street Address City: _____ State UT Zip: _____					
5. The Limited Liability Company shall use as its name in Utah: Onvoy, LLC Must be the same as number (1) unless the name is not available or permitted in Utah.					
6. Purpose of the Limited Liability Company: (optional) VOPI services					
7. Managers/Members of the Limited Liability Company: (optional)					
Position	Name	Address	City	State	Zip
MANAGER:					
MANAGER:					
MEMBER:	Zayo Group Holdings, Inc.	1805 29th Street Boulder, Colorado	80301		
MEMBER:					
Under penalties of perjury, I declare that this application for authority to transact business has been examined by me and is, to the best of my knowledge and belief, true, correct and complete. Authorized Signature: _____ Name & Title: <u>SCOTTE BEER, CLERK OF COURSE &amp; SECRETARY</u> Under GRAMA (63-2-201), all registration information maintained by the Division is classified as public record. For confidentiality purposes, you may use the business entity physical address rather than the residential or private address of any individual affiliated with the entity. Optional Inclusion of Ownership Information: This information is not required. Is this a female owned business? <input type="radio"/> Yes <input checked="" type="radio"/> No Is this a minority owned business? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, please specify: <input type="text" value="Select/Type the race of the owner here"/>					

State of Utah  
 Department of Commerce  
 Division of Corporations and Commercial Code  
 I hereby certified that the foregoing has been filed  
 and approved on this 13 day of April, 2014  
 in this office of this Division and hereby issued  
 This Certificate thereof.

Examiner ts Date 4-24-14



Kathy Berg  
 Kathy Berg  
 Division Director