

1.) CORPORATION NAME:

Aruba Networks, Inc.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1666926**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	350,000,000
PREFER	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1344 CROSSMAN AVE.

CITY/ST/ZIP: SUNNYVALE, CA 94089

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: KEERTI MELKOTE TITLE: CTO ADDRESS: 1344 CROSSMAN AVE. CITY/ST/ZIP/CO: SUNNYVALE, CA 94089</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: DOMINIC ORR TITLE: CEO ADDRESS: 1344 CROSSMAN AVE. CITY/ST/ZIP/CO: SUNNYVALE, CA 94089</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL GALVIN TITLE: CFO ADDRESS: 1344 CROSSMAN AVE CITY/ST/ZIP/CO: SUNNYVALE, CA 94089</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL R KOUREY TITLE: DIRECTOR ADDRESS: 1322 CROSSMAN AVENUE CITY/ST/ZIP/CO: SUNNYVALE, CA 94089</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: DAN WARMENHOVEN TITLE: DIRECTOR ADDRESS: 1322 CROSSMAN AVENUE CITY/ST/ZIP/CO: SUNNYVALE, CA 94089</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: BERNARD GUIDON TITLE: DIRECTOR ADDRESS: 1344 CROSSMAN AVE. CITY/ST/ZIP/CO: SUNNYVALE, CA 94089</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EMMANUEL T HERNANDEZ DIRECTOR 1344 CROSSMAN AVE. SUNNYVALE, CA 94089	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	---	----------------------------------	--

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLEM ROELANDTS DIRECTOR 1344 CROSSMAN AVE. SUNNYVALE, CA 94089	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	---	----------------------------------	--

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JUERGEN ROTTLE DIRECTOR 1344 CROSSMAN AVE. SUNNYVALE, CA 94089	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	---	----------------------------------	--

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MICHAEL GALVIN	MICHAEL GALVIN, CFO	5/27/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.