M03000002465

(Requestor's Name)						
(Address)						
(Address)						
,						
(City/State/Zip/Phone #)						
(Only/Out.O/2.Ip/)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
``						
Special Instructions to Filing Officer:						

Office Use Only



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BK





ACCOUNT NO. : 072100000032
REFERENCE : 174325 7355069
AUTHORIZATION : Main to
COST LIMIT : \$ 125.00
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
ORDER DATE: July 18, 2003
ORDER TIME: 10:56 AM
ORDER NO. : 174325-005
CUSTOMER NO: 7355069
CUSTOMER: Mr. Timothy Richardson Visipath, L.1.c. 16670 Sw 78th Place
Miami, FL 33157
FOREIGN FILINGS
NAME: VISIPATH, L.L.C.
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Darlene Ward -- EXT# 1135

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

			608.503, FLORIDA STA IRANSACT BUSINESS I				SUBMITTE	ED TO REG	GISTER A	4 FOREIGN
		L.L.C.							ور سي <i>ر</i>	Ú.
1. <u> </u>			(Name of for	eign limited	liability c	company)	<u> </u>	S. Carrier	-	
2 DF	LAWARE								. 13	, C
<u>(Ju</u>	risdiction un	der the law of whi	ch foreign limited liabi	lity		(FEI num	ber, if apr	licable).		
		company is org	anized)	•				بر ` `	26/2 E	ڊ
4		8/20/02	tion)	5	N	'/A			9.7	స్త
7. —		Date of Organiza	cion)	J(D	uration:	Year limite	ed liability	company v	villicease	to
			•			exist o	r "perpetua	I")		
6.	Upon fil	Ling								
o		(Date first transac	ted business in Florida	. (See section	ıs 608.50	1, 608,502	2 and 817.	155, F.S.)	 -	
				•			-			
7	166	70 SW 7	18th Place		<u>.</u>	<u> </u>	<u>, - , </u>			<u> </u>
_	m	iami, FL	33(57 (Street ad							<u> </u>
		,	(Street ad	dress of prin	cipal offi	ce)				
O TO		1 ***.	,				/			
8. II	limited lia	ibility company	/ is a manager-mana	aged compa	any, che	eck here	<u>V</u>			
о т г	1	1 11 '	11 0.1					0.11		
9. I	ne name ar	nd usual busine	ss addresses of the	managing	membe.	rs or mai	nagers are	ollot as s	ws:	
	- 11	w D. 1	/		·4. 1	<i>1</i>				
-	morny	W. Nichar	<u>dsav</u> 166 70	SW 78	na pr	ace !	Vanie,	FL 35	157	
	board	1 Part	/2-12	47	,	.	411	, ,	_	
-	CIEVAIG	rocha		Norma	indy	DRIVE	Atlar	ita, G	A 30.	306
_					<u> </u>	• •	5 ' 7		<u> </u>	
		<u> </u>	<u></u>		<u></u>	<u> </u>				
			of existence, no more th							
			which it is organized. (A			ptable. If t	he certificat	e is in a fon	eign langı	uage, a
tr	anslation of t	he certificate unde	roath of the translator m	ust be submit	ted.)					
						•				
11. 1	Nature of b	ousiness or purp	ooses to be conducte	ed or prom	oted in	Florida:				
		•		_						
	- 1	Vireless	Communica	from 5	ravio					
			enotyw. Er		-					
		Signatu	re of a member or a	n authoriz	ed repre	esentative	e of a mer	mher		
			ance with section 608.408							
		an affirm	ation under the penalties o	of perjury that	the facts s	tated herein				
		ブ	Typed or pri	chamler	1					
			Typed or pr	inted name	ofsian		 -			

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.

STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGI								
STATE OF FLO	JRIDA.			\$ 13 h				
1. The name of	f the Limited Liability Comp	oany is:		A P				
VISIPATH, L	.L.C.			<u> </u>				
2. The name ar	nd the Florida street address	of the register	red agent and office are:	Y				
Corporation Service Company								
(Name)								
1201 Hays Street								
	Tallahassee	FL	32301					
				••.				
Having been no	med as revistered agent and	to accept serv	rice of process for the abo	ve stated limited				

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.

and Stilling
(Signature)

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VISIPATH, L.L.C." 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-SECOND DAY OF JULY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VISIPATM,

L.L.C." WAS FORMED ON THE THIRTIETH DAY OF AUGUST, A.D. 2002. T

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES TAVET

BEEN PAID TO DATE.



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2541112

DATE: 07-22-03

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