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Account Name: C T CORPORATION SYSTEM
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FOREIGN LIMITED LIABILITY COMPANY
V3 Partners, L.L.C.

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<th>Certificate of Status</th>
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https://efile.sunbiz.org/scripts/efilcovr.exe
9/10/04
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.093, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. V3 Partners, L.L.C. (Name of Foreign Limited Liability Company)

2. Texas (Jurisdiction under the law of which foreign limited liability company is organized)

3. 01-065421-4 (FBI number, if applicable)

4. January 1, 2001 (Date of Organization)

5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")

6. (Date first transacted business in Florida, if prior to registration.)
   (See sections 608.5(6) & 608.502 F.S. to determine penalty liability)

7. 201 W. Virginia
   McKinney, Texas 75069 (Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here □

9. The name and usual business addresses of the managing members or managers are as follows:
   James P. Jacker - 201 W. Virginia McKinney, Texas 75069

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: Technical Support

__________________________
Signature of a member or an authorized representative of a member.
(If 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)

James P. Jacker

__________________________
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:
   VJ Partners, L., L. C.

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

   CT Corporation System
   (Name)

   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 609, Florida Statutes.

   CT Corporation System
   By: [Signature]

   Maria Ozaeta
   Vice President

   $100.00 Filing Fee for Application
   $25.00 Designation of Registered Agent
   $30.00 Certified Copy (optional)
   $5.00 Certificate of Status (optional)
Corporations Section
P.O. Box 13697
Austin, Texas 78711-3697

Geoffrey S. Connor
Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for V3 PARTNERS, L.L.C. (filing number: 800861324), a Domestic Limited Liability Company (LLC), was filed in this office on March 04, 2002.

It is further certified that the entity status in Texas is active.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 09, 2004.

Geoffrey S. Connor
Secretary of State

THE STATE OF TEXAS

PHONE (512) 463-5553
FAX (512) 463-9709
TTY 7-1-1

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