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ACCOUNT NO. : 072100000032

REFERENCE : 121043

4809298

AUTHORIZATION

COST LIMIT :

\$ 125.00

ORDER DATE : January 4, 2005

ORDER TIME : 12:58 PM

ORDER NO. : 121043-005

CUSTOMER NO: 4809298

CUSTOMER: Ms. Beatrice Kwok

Riker, Danzig, Scherer,

1 Speedwell Avenue

Morristown, NJ 07962

#### FOREIGN FILINGS

NAME: EMS MANAGEMENT, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER:

PAGE STANDARD OF SOR

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

IN COMPLIANCE WITH SECTION 608508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

EMS Management, LLC		
(Name o	of Foreign Lunited Lie	ability Company)
New Jersey		Not applicable
(Jurisdiction under the law of which foreig company is organized)	m limited liability	(FEI aumber, if applicable)
December 13, 2004	5.	Perpetual
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
Upon Filing		
(Date first transa (See sections 608.	cted business in Flori 501 & 608.502 F.S. to	ida, if prior to registration.) o determine penalty liability)
220 Bel Air Court		
Holmdel, NJ 07733		
	(Street Address of	Principal Office)
If limited liability company is a ma	mager-managed o	ompany, check here 🗹
The name and usual histiness addre	esses of the manac	ging members or managers are as follows:
THE DWING THE SOME CASHEDS SCREET	ward of the menes	bing members of managers are as tollows:
Elliot Schnier		
220 Bel Air Court		
Holmdel, NJ 07733		
	nized. (A photocopy is aslator must be submitt	,
		tomoted in Florida.
ownership/lease/sale of real/	estate	
_ Gra	1 delin	m
		orized representative of a member.
		the execution of this document constitutes that the facts stated herein are true,)
	r. Manager/Mem	•
T	uned or printed no	arms of Giorges

# 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.

The name a	nd the Florida street addres	s of the registered agent and office	are:
	Ellict Schnier		
		(Name)	<del></del>
	3740 South Ocean Blvd	d., Suite 2502	
	Florida Street Ac	idress (P.O. Box NOT ACCEPTABLE)	<del></del>
	Highland Beach	FL 33487	
		City/State/Zip	

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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

# STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

## EMS MANAGEMENT, LLC 0600221255

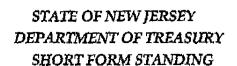
I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on December 13, 2004.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

William Melloy 400 Port Carteret Dr Carteret, NJ 07008

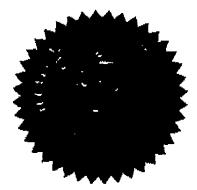
Continued on next page . . .



EMS MANAGEMENT, LLC

IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 4th day of January, 2005



John E McCormac, CPA State Treasurer