05/20/2005 09:55

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CT CORPORATION SYSTM

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Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name

: C T CORFORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5926

FOREIGN LIMITED LIABILITY COMPAN

AREC 2, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Gackenia Fling Manue

Composite filling

PUBLIC ACCOUNT HAVE

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: AREC 2, LLC		
	(Name of Limited Liability Company)	
Florida," Certificate of Existence, an liability company to transact busines		insact Business in foreign limited
Please return all correspondence con	cerning this matter to the following:	
Nancy ¹	√enre	
**************************************	(Name of Person)	
TJ-Moul	International, Inc.	
	(Firm/Company)	
	~ · · · · · · · · · · · · · · · · · · ·	AE SE O
2721 N	. Central Avenue	CCR S
	(Address)	JUN 20 CRETARY LAHASSE
		20 20 20 20 20
Phoenia Phoenia	x, Arizona 85004	PS ≥ FT
	(City/State and Zip Code)	F.S.
For further information concerning the	nis matter, please cali:	AM II: 02 OF STATE OF
Nancy Ventre	at (602) 263-6195	
(Name of Person		Yumber)
STREET ADDRESS:	MAILING ADDRESS:	•
Registration Section	Registration Section	
Division of Corporations 409 E. Gaines Street	Division of Corporations P.O. Box 6327	
Tallahasses, Florida 32399		
Enclosed is a check for the following	Tallahassee, Florida 32314 amount:	
	O Filing Fee & S155 00 Filing Fee & S160.00 Filing	Fee, Certificate tus & Certified Copy

19.037 - 0203/04 C 7 System Chiles

PLOST - 09/03/04 C T System Deline

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

AREC 2,LLC	(Namo of Foreign Li	imited List	lity Company)		
Delaware	,	•		20-2848135	
	w of which foreign limited lis	3. ability	(FEI n	umber, if applicab	le)
May 13, 2005		5 .	Perpetral		
(Dale of C	organization)		(Diretion: Year lim exist or "perpetual"	ited liability compa)	my will cease to
Upon filing this app					
((Date first transacted busines See sections 608.501 & 608.5	ss in Florid 502 F.S. to	a, if prior to registrat determine penalty lis	ion.) ibility)	
2721 N. Central Ave	nuo eu				
Phoenix, Arizona 85	004				
	(Street A	ddress of	rincipal Office)		
	ソフロウクロコノ 10 5 155030302072775	നമയ്ക്ക് കഥ	moany, check her	re l□	
·	business addresses of the		mpany, check her ng members or m	_	ollowe:
·		e managi	ng members or m	_	ollowe:
The name and usual	business addresses of the	e managi Phosnix, Ar	ng members or m izona 85004	_	ollows:
The name and usual Carlos Vizcana	business addresses of the 2721 N. Central Avenue, F	e managi Phoenix, Ar	ng members or m izona 85004 izona 85004	_	ALLAMASS
The name and usual Carlos Vizzarra Jennifer M. Settles Gary B. Horton Attached is an original ce jurisdiction under the law	business addresses of the 2721 N. Central Avenue, F 2721 N. Central Avenue, F	e managi Phoenix, Ar Phoenix, Ar Phoenix, Ar ium 90 days sotocopy is	ng members or m izona 85004 izona 85004 rizona 85004 cold, duly suttenficate not acceptable. If the	anagers are as fo	TALLA HASSEE
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Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 ₪ 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:			
AREC 2, LLC			_	
2. The name at	d the Florida street address of the registered agent and office are:	E '		
	CT Corporation System	SE	05	
	(Name)	CRET LAH/	05 JUN 20	7
	1200 South Pine Island Road	AR	20	ji d
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	Y OF	AM 11: 02	
	Plantation FL 33324	LO LO	☴	
	City/State/Zip	RIDA	20	
liability compan agent and agree relating to the p	med as registered agent and to accept service of process for the above s y at the place designated in this certificate, I hereby accept the appoints to act in this capacity. I further agree to comply with the provisions of coper and complete performance of my duties, and I am familiar with as y position as registered agent as provided for in Chapter 608, Florida S	nent as registe all statutes ad accept the	ered	
By: Ma	CT Corporation System Misting Oznaka What Transition dent (Signature)			

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

CT CORPORATION SYSTM

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERESY CERTIFY "AREC 2, LLC" IS DULY PORMED 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 NINETEENTH DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



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050413079

AUTHENTICATION: 3891649

DATE: 09-19-05