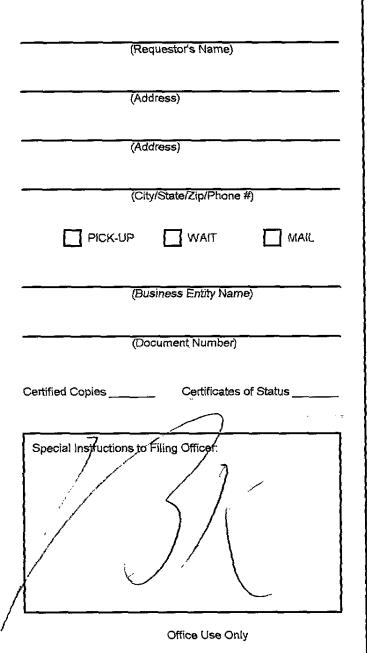
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ACCOUNT NO. : 072100000032

REFERENCE

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE: May 10, 2006

ORDER TIME: 10:37 AM

ORDER NO. : 096756-005

CUSTOMER NO: 7502418

FOREIGN FILINGS

NAME: LIVING WATERS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY _ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace -- EXT# 2928

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LINATED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA LIVING WATERS, LLC (Name of Foreign Limited Liability Company) Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) company is organized) (Date of Organization) (Duration: Year limited liability compani exist or "perpetual") Nor KNOWN (Date first transacted business in Florida, if prior to registration.) (See sections 608 501 & 608.502 F.S. to determine penalty liability) Villa TEIMUL (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: 4 (10. Attached is an original cartificate 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:

Signature of a member or an authorized representative of a member. (In accordance with section 608,408(3), FS, the execution of this document constitutes an affirmation under the penalties of perjuty that the facts stated herein are true)

Typed or printed name of signee

WNUK - Ashman

GRAZYNA

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.

FLORIDA.		
1. The name	1. The name of the Limited Liability Company is:	
LIVING WATERS, LLC		
2. The name	me of the Limited Liability Company is:	
	GRAZYNA WNUK	
	(Name)	
	21634 : CLUB VILLA TERRACE	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	BOCA RATON, FL 33433	
	Chy/State/2tp	
liability comp agent and ag relating to th obligations o	pany at the place designated in this certificate, I hereby accept the appointment as registered ree to act in this capacity. I further agree to comply with the provisions of all statutes e proper and complete performance of my duties, and I am familiar with and accept the f my position as registered agent as provided for in Chapter 608, Florida Statutes.	

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIVING WATERS, LIC" 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 TENTH DAY OF MAY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LIVING WATERS, LLC" WAS FORMED ON THE NINETEENTH DAY OF SEPTEMBER, A.D. 2005.

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

Darriet Smith Hindson

AUTHENTICATION: 4734010

DATE: 05-10-06

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