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## FOREIGN PROFIT QUALIFICATION

Empirian West Managing Member, Inc.

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#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF PLORIDA.

	f corporation; must include "INCORPORATED "Corp," "Inc," "Co," of "Corp.")	," "COMPANY," "CORPORATION,"	<u>-</u>
(If name unav	silable in Florida, onter elternate corporate name	e adopted for the purpose of vanisaving business in Florida)	<del>,</del>
Delaware	9	- Applied For	
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)	_
May 28, 2004		Perpetual	
(Da	ne of incorporation)	(Duration: Year corp. will oesse to exist or "perpetual")	
Upon Qualific	ation.		
(Date first trans	acted business in Florida. If corporation has not (SEE SECTIONS 607 1501	st transacted business in Florida, insert "upon qualification." 1, 607.1502 and 817.155, P.S.)	
c/o Scotland H	III Administrative Services, Inc. 25 Philips Parks	way, Montrale, New Jersey 07645	-· <del>-</del> -
	(Principal office add	(ess)	*
Same		•	
	(Current moiling add	ress)	•
	ging member of limited liability company which		
/Furnate	(s) of corporation authorized in home state or co	runtry to be curried out in state of Florida)	
/- ut \$0.50			
, ,	reet address of Florida registered agent: (	(P.O. Box or Mail Drop Box NOT acceptable)	n 0
Name and st	<del>-</del>	(P.O. Box or Mail Drop Box NOT acceptable)	C 40
Name and <u>st</u> Name:	C T Corporation System	(P.O. Box or Mail Drop Box NOT acceptable)	40L 70
Name and <u>st</u> Name:	<del>-</del>	(P.O. Box or Mail Drop Box NOT acceptable)	04 JUN -1
Name and <u>st</u> Name:	C T Corporation System	TO A STATE OF THE PARTY OF THE	SECRETARY AND A PARTY OF THE PA
Name and <u>st</u> Name:	C T Corporation System  1200 South Pine Island Road	(P.O. Box or Mail Drop Box NOT acceptable)  Property of the control of the contro	
Name and str Name: Roe Address: Registered a	C T Corporation System  1200 South Pine Island Road  Plantation (City)  Igent's acceptance:	Florida 33324 (Zip code)	
Name and stand Name:  Name:  Rec Address:  Registered a ving been namignated in this ther agrees to come and the standard in this ther agrees to come agrees the come agrees to come agrees the come agrees to come agrees the come agree the come agrees the come agrees the come agree the come agrees the come agree the come a	CT Corporation System  1200 South Pine Island Road  Plantation (City)  Igent's acceptance: med as registered agent and to accept service application, I hereby accept the appointm	Florida 33324  (Zip code)  The code of process for the above stated corporation at the piecest as registered agent and agree to act in this capacitative to the proper and complete performance of mo	December 1

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

Ву:

A. DIRECTORS			
Caaliman: Ezra Beyman			_
Address: co Scotland Hill Administrative Services, Inc. 25 Philips Parkway, Montrale, New Jersey 07645			~
			_
Vice Chairman:	<del></del>		<del>-</del>
Address:			_
Director: Independent Director to be named in the future			
Address:			
	_,		_
Director:	<u></u>		
Address;			
			- <b>-</b>
B. OFFICERS			
President: Ezra Beyman			_
Address: c/o Scouland Hill Administrative Services, Inc. 25 Philips Parkway, Montvale, New Jersey 07645	>0		
	<u> </u>	100	_
Vice Presidenti	<u> </u>	<u> </u>	<b>–</b>
Address:	- <del>M2</del>	>	== }:. <b>-</b> -
		<u>교</u>	اسد ج
Secretary: Exta Bayman	<u> </u>	<u>ω</u> _	_
Address: c/o Scotland Hill Administrative Services, Inc. 25 Philips Parkway, Montvale, New Jersey 07645	3-	·	<u> </u>
Treasurer, Ezra Beyman			-
Address: co Scotland Hill Administrative Services, Inc. 25 Philips Parkway, Montvele, New Jersey 07645		<del></del>	-
NOTE: If necessary, you may attach an Aldendum to the application listing additional officers and/or of	livectors		<del>.</del>
13	ALL COLOTS.		
(Signature of Director of Cirical listed in number 12 of the application)		·	
14. Euro Beyman, fres: 22-4  (Typed or printed name and capacity of person signing application)			-
(1) here or britted name and capacity of betaou (fluing abblication)			

# Delaware

PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EMPIRIAN WEST MANAGING MEMBER, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF JUNE, A.D. 2004.

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

3807779 8300

040405139

Warriet Smith Hindson

AUTHENTICATION: 3143567

DATE: 06-01-04