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SECRETARY OF STATE

TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations				
SUBJ					
	1)	Name of Limited Liabili	ity Company)		
Florid	nclosed "Application by Foreigra," Certificate of Existence, and y company to transact business	check are submitted to			
Please	return all correspondence conc	erning this matter to the	following:		
	Joseph \	V.N. Rugg, Esq.			
		(Name of Perso	on)		
	Akerman Senterfitt				
		(Firm/Compan	y)		
	100 S. Ashley Drive, Suite 1	500			
		(Address)		5 ~	
	Tampa, FL 33602			SECRE	77
		(City/State and Zip	Code)	ASS. H. H.	
For fu	ther information concerning thi	s matter, please call:		Y OF STATE	
	Joseph W.N. Rugg, Esq.	at (_ ⁸¹³	_\ 223-7333	RESE HS	
	(Name of Perso	n) (Area	Code & Daytime Telep	hone Number)	•
	STREET ADDRESS: Registration Section		IAILING ADDRESS: egistration Section		
	Division of Corporations		ivision of Corporations		
	409 E. Gaines Street	P.	O. Box 6327		
	Tallahassee, Florida 32399	Ta	allahassee, Florida 3231	4	
Enclos	ed is a check for the following a	mount:			
	□ \$125.00 Filing Fee □ \$130.00	Filing Fee & \$155.00 Certificate of Status	Filing Fee & Z \$160.00 Certified Copy	Filing Fee, Certific of Status & Certifi	

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Radiation Decontamination Solutions, LI	.c
(Name of I	Foreign Limited Liability Company)
Delaware (Jurisdiction under the law of which foreign	Imited liability (FEI number, if applicable)
company is organized)	, , , , , , , , , , , , , , , , , , ,
4. 07/08/2004	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. July 1, 2005	
(Date first transacti (See sections 608.50	ed business in Florida, if prior to registration.) 11 & 608.502 F.S. to determine penalty liability)
7. 101A Dunbar Avenue, Oldsmar, FL 346	577
Section 1 to the section of the section 1 to 1	enise pageneste e prima 设备 "are prime"。 > 150 mm a militaria
	(Street Address of Principal Office)
8. If limited liability company is a man	ager-managed company, check here
9. The name and usual business address	ses of the managing members or managers are as follows:
Richard Ferrelli, Managing Member, 10	11A Dunbar Avenue, Oldsmar, FL 34677
M&S Brachytherapy, LLC, Managing N	lember, Bruno Schmidt, Manager, 101A Dunbar Avenue, Oldsmar, El
34677	Eo D
10. Attached is an existinal certificate of existence	no more than 90 days old, duly authenticated by the official having districtly officcords in
	ized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the trans	
11. Nature of business or purposes to b	e conducted or promoted in Florida: Cleaning Solutions
Mill	Heed, Macen
	ember or an authorized representative of a member.
	ction 608.408(3), F.S., the execution of this document constitutes the penalties of perjury that the facts stated herein are true.)
Rich Ferrelli, Mana	
T	yped 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 Liab	pility Company is:		
Radiation Dec	contamination Solution	ns, LLC		
2. The name	and the Florida stre	et address of the registered agent and off	ice are:	
	Richard Ferrelli, N	Managing Member		
		(Name)		
	101A Dunbar Ave	enue		
	Floric	da Street Address (P.O. Box NOT ACCEPTABLE)		
	Oldsmar	FL 34677		
		City/State/Zip		
liability comp agent and agr relating to the	oany at the place desi ree to act in this capa e proper and complet	agent and to accept service of process for ignated in this certificate, I hereby accept the acity. I further agree to comply with the properties performance of my duties, and I am family agent as provided for in Chapter 606	he appointment as vovisions of all state iliar with and accep	registered =

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

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RADIATION DECONTAMINATION SOLUTIONS, LLC" 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 FIFTH DAY OF JULY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RADIATION DECONTAMINATION SOLUTIONS, LLC" WAS FORMED ON THE SIXTH DAY OF JULY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3997462

DATE: 07-05-05

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