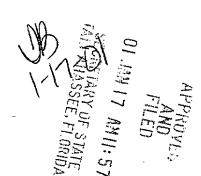
#### CT CORPORATION SYSTEM

# M010000001

(1) Advanced Mobile Power	7,000		
(2) Dispersed Power, LLC			
() Profit	() Amendment	() Merger	
() Nonprofit		()8	
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Verifier			
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		200003551892	
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\*\*\*\*125.00 \*\*\*\*125.00

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615



## 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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

Delaware  Jurisdiction under the law of which foreign limited liability ompany is organized)  12/14/2000  (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")  Upon Filing.  (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)  301 E. Ocean Blvd., Suite 210, Stuart, Florida 34994  (Street address of principal office)  If limited liability company is a manager-managed company, check here	Delaware  Jurisdiction under the law of which foreign limited liability ompany is organized)  12/14/2000  (Date of Organization)  Upon Filing.  (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)  301 E. Ocean Blvd., Suite 210, Smart, Florida 34994  (Street address of principal office)  If limited liability company is a manager-managed company, check here  The usual business addresses of the managing members or managers are as follows:		le Power Systems, LLC	reign limited liability company)	T 12 T	
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## 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 and the Florida street	address of the registered agent and office	e are:
CT Corporation System	m :	
	(Name)	
c/o C T Corporation Sy	stem, 1200 South Pine Island Road	
Florida :	street address (P.O. Box NOT ACCEPTABLE)	<del></del>
Plantation	<b>FL</b> 33324	
	City/Stafe/Zip	<del></del>

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered 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, F.S..

CT Corporation System

(Signature)

The J. Cinnihan ASSt. VP

1. The name of the Limited Liability Company is:

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

#### $State\ of\ Delaware$

PAGE 1

### Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ADVANCED MOBILE POWER SYSTEMS, 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 FOURTH DAY OF JANUARY, A.D. 2001.

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

Harriet Smith Windford

AUTHENTICATION: 0893367

3301088 8300

010005375

DATE: 01-04-01