M030000/3/6

(Re	questor's Name)					
(Ad	dress)					
(Ad	dress)					
(Cit	y/State/Zip/Phone	e #)				
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Do	cument Number)					
Certified Copies	Certificates	of Status				
Special Instructions to I	Filing Officer:					
						

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LONG ANY OF STATE TO LAHASSEE, FLORIDA



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TEURLIARY OF STATE
TALLAHASSEE, FLORIDA

Mary H. Scott Paralegal Direct Dial: 410.385,4292 mhs@shapirosher.com

36 S. Charles Street |Suite 2000 |Raltimore, Maryland | 1201-3147 | Felephone: 410.385.0202 | Facsimile: 410.539.7611

April 24, 2003

VIA UPS

Registration Section Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Re: Qualification of a Maryland Limited Liability Company in Florida

Dear Sir or Madam:

Enclosed for filing on behalf of S.A.F.E. Management, LLC, a Maryland limited liability company, is an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida. Also enclosed is the Certificate of Designation of Registered Agent/Registered Office, a Certificate of Good Standing from the State of Maryland, and our check in the amount of \$130.00 for the filing fees. I have included the \$5.00 for a Certificate of Status.

Upon the acceptance of this filing, please return the Certificate of Status to me in the enclosed self-addressed UPS envelope.

Thank you for your assistance. Please contact me immedialtey if you have any questions or require additional information.

Sincerely,

Mary H. Scott

Enclosures

FILED APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 03 APR 25 PM 1: 31

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECESTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. S.A.	F.E. Management, LLC
	(Name of foreign limited liability company)
_{2.} Marylaı	nd 3.
(Jurisdicti	on under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. May 1	, 2002 5 perpetual (Duration: Year limited liability company will cease to
	, 2002 5 perpetual (Date of Organization) 5 (Duration: Year limited liability company will cease to exist or "perpetual")
_{6.} Upon	qualification.
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7. 1101	South Russell Street
Baltin	nore, Maryland 21230
	(Street address of principal office)
8. If limit	ed liability company is a manager-managed company, check here 🗹
9. The nat	ne and usual business addresses of the managing members or managers are as follows:
Jame	es C. McIntyre, Manager
-	South Russell Street
Baltir	nore, Maryland 21230
•	
	is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
	tiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
ransian	on of the certificate under oath of the translator must be submitted.)
11. Nature	e of business or purposes to be conducted or promoted in Florida:
Event	management services.
	Vin Natalia
	Signature of a member or an authorized representative of a member.
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes
	an affirmation under the penalties of perjury that the facts stated herein are true.) James C. McIntyre, Manager
	ournes of monthly attended

Typed or printed name of signee

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE

THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING

STATE OF FLORIDA.

SEURLIARY OF STATE TALLAHASSEE, FLORIDA PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,

1. The name of the Limited L	iability Compa	ny is:				
S.A.F.E. Management, LL	С		ي ي	<u> </u>	7.	
2. The name and the Florida	street address o	f the regi	stered agent a	and office are:		
Corpora	tion Serv	ice Co (Name)	mpany		 .	
1201 Hay	<u>s Street .</u> Florida street addre	ess (P.O. B	Box NOT ACCEP	TABLE)	.	<u></u>
		. FL ty/State/Zij	32301 p)			
Having been named as register liability company at the place registered agent and agree to statutes relating to the proper accept the obligations of my performance.	designated in th act in this capae and complete p	us certific city. I fur erforman	cate, I hereby rther agree to ce of my dutie	accept the app comply with the es, and I am far	ointment as se provisions o niliar with and	fall
Evelyn Wright/Autho	rized Rep	resent	ative of	Corporat	ion Servi	ce Company
	\$ 100.00 \$ 25.00 \$ 30.00	Designa	Fee for Appli ation of Regised Copy (opti	stered Agent		

\$ 5.00 Certificate of Status (optional)

STATE OF MARYLAND

Department of Assessments and Taxation

FILED

03 APR 25 PM 1:

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF AREAHASSEE, FLOSTATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT S.A.F.E. MANAGEMENT, LLC IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS APRIL 23, 2003.

Paul B. Anderson Charter Division

Paul B. Undown



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097