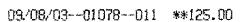
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April 7, 2003

Florida Dept. of State Registration Section Div. of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

The enclosed "Application by Foreign Cosp. for Authorization to Transact Business in Florida", "Certificate of Existence", "Certificate of Designation of Registered Agent/Office", and our check are submitted to register to transact business in Florida.

Please return all correspondence concerning this matter to me. For further information concerning this matter, please call: 803-329-9682.

Regards

Gail A. Creed Bookkeeper

Enc. Ck for \$125.00

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: company is organized) (Duration! Year limited liability company will cease to 3/3/03
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F (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: ouglas C. Creed 3934 Airway Dr. Rock Hill, SC 10. Attached is an original certificate 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), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed 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.

imensional Stone, LLC

2. The name and	the Florida street address of the registered agent and offic	e are:
	Richard Wichols	
	(Name)	
	565 Country Clab Drive	
	Florida street address (P.O. Box NOT ACCEPTABLE)	
_	Titus Ville, FL 32780	
,	City/State/Zip	

1. The name of the Limited Liability Company is:

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..

\$ 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 RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown
Secretary of State

The Office of the Secretary of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

DIGITAL DIMENSIONAL STONE, LLC.

a Rhode Island Limited Liability Company, filed original articles of organization in this office on the seventeenth day of March A.D., 1999; and

IT IS FURTHER CERTIFIED that said company is now of record and in good standing in this office.

SIGNED AND SEALED this tenth day of July A.D., 2003.

Secretary of State

Matter Brown

BY ANDLIA M. FLANCISC

