

| (Requestor's Name) | |
|---|--------|
| (Address) | |
| | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | · |
| Special Instructions to Filing Officer: | \neg |
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| CUTWS | |
| Office Use Only | |



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JeoWind LLC

1715 Hodges Blvd #2112 Jacksonville Fl 32224

December 23, 2003

Registration Services Division of Corporations P.O. Box 6327 Tallahassee FL 32314

This transmittal letter is to serve as notification of the registration of a foreign limited liability company to transact business in Florida. Enclosed are the required forms and payment of \$160.00 (one hundred and sixty).

Sincerely,

Todd Handler Owner / Operator

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:

| 1. JEOWINE |) くしこ (Name of foreign limited liability company) |
|---------------------------|--|
| , | (Name of foreign limited liability company) |
| 2. DELAWAGE | ne law of which foreign limited liability 3. 6(- 44 8062 (FEI number, if applicable) |
| co | mpany is organized) |
| 4. 4903 | of Organization) 5. AERPETUAL (Duration: Year limited liability company will cease to exist or "nemetical") |
| | onist of perferant, |
| 6. 7219 03 - 1 | ECEMBER 19th 2003 e first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) |
| | |
| - 4 | IFES BLVD # 2112 |
| JACKSON | (Street address of principal office) |
| | (Street address of principal office) |
| 8. If limited liability | ty company is a manager-managed company, check here X |
| 9. The name and u | sual business addresses of the managing members or managers are as follows: |
| TODO HA | MDLEA PEGE |
| | |
| 1715 HOD | 665 BLVD # 2112 |
| | 665 PLVO # 2112 MUE FL 32224 |
| | ្ច ហ្ |
| | Em B |
| 10. Attached is an origin | nal certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records |
| ✓ | er the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a |
| translation of the ce | rtificate under oath of the translator must be submitted.) |
| 11. Nature of busin | ness or purposes to be conducted or promoted in Florida: 1) CUSTOM COMPUTER |
| sehnces | 2) HETALL OPEHATIONS |
| | |
| | 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.) |
| | TODO C HANDLEL |
| | 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.

| npany is: |
|---|
| |
| s of the registered agent and office are: |
| HANDLEK (Name) |
| (Name) 5 BLVD #2112 |
| ddress (P.O. Box NOT ACCEPTABLE) |
| C / FL / 32224 (City/State/Zip) |
| |

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.

(Signature)

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JEOWIND 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 SIXTEENTH DAY OF DECEMBER, A.D. 2003.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 2816039

DATE: 12-16-03

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