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FOREIGN LIMITED LIABILITY COMPANY

Venturi Technology Partners, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of foreign hi	mited liability company)
North Carolina Jurisdiction under the law of whi company is org	ich foreign limited liability	(FEI number, if applicable)
8/05/2003 (Date of Organiza		perpetual  (Duration: Year limited liability company will cease cxist or "perpetual")
Upon Cline (Date first transac	red business in Ploride. (Sec:	sections 608.501, 608.502, and 817.155, F.S.)
2709 Water Ridge Pkwy, 2nd F		,
Charlotte, NC 28217		
	(Street address o	of principal office)
If limited liability company	y is a manager-managed o	company, check here
The name and usual busine	ess addresses of the mana	iging members or managers are as follows:
Ken R. Bramlett, Jr.		
2709 Water Ridge Plewy, 2nd F	Floor, Charlotte, NC 28217	
	f which it is organized. (A ph	days old, duly authernicated by the official having custo otocopy is not acceptable. If the certificate is in a foreittor must be submitted.)
. Nature of business or pur	poses to be conducted or	promoted in Florida:
information technology and cor	naulting services,	
	6/0	4
Signatu	re of a member or an axi	horized representative of a member.
(In accord	lance with section 603,403(3), P.S	horized representative of a member. S., the execution of this document constitutes by 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.

STATE OF FLO	ORIDA.	•			
1. The name of	the Limited Liabilit	ty Company is:			
Venturi Technolo	gy Parmera, LLC				
2. The name ar	nd the Florida street	address of the register	ed agent and office are:		
		C T Corporation Syste	<del>em</del>		
(Name)					
c/o C T Corporation System, 1200 South Pine Island Road					
	Florida	street address (P.O. Box )	<u>(OT</u> acceptable)	SEC	
	Plantation,	FL	33324	RETA AHAS	
		(City/State/Zip)		SEE	
liability compar registered agent statutes relating	ry at the place design t and agree to act in t to the proper and co	ated in this certificate, this capacity. I further implete performance o	ice of process for the abov I hereby accept the appoir agree to comply with the If my duties, and I am fami provided for in Chapter (	intment as Provisions of all liter with and	
By:	CT Corporation Syste				

Allan Farnell, Vice President

\$ 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 North Carolina Department of The Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### VENTURI TECHNOLOGY PARTNERS, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 29th day of December, 2002, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 29th day of December, 2003

Claime J. Marchall
Secretary of State

Certification# 7944195-1 Reference# 5647265-ACH Page: 1 of 1 Verify this certificate online at www.secretary.state.no.us/verification