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Livonia	(duress)	Zin/Dhan	48154	_		
(City/State/Zip/Phone #)						
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SECRETARY OF STATE ATTOMS

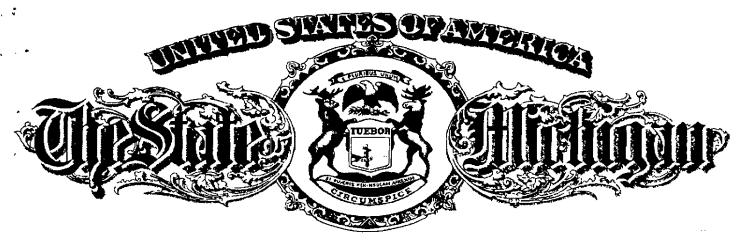
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. Le Blaise, LLC (Name of foreign limited liability company)
2. State of Michigan (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
company is organized) 4. Murch 19, 2003 (Date of Organization) 5. Propertical (Duration: Year limited liability company will cease to exist or "perpetual")
6. Future dute— as soon as possible (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7. 16252 Marsha Street
Livonia, MI 48154 (Street address of principal office)
(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: &
Toda Mailloux
16252 Marsha Street
Livonia, MI 48154
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: Handyman
Dusiness
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.)
Todd Mailloux
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.

1. The name of the L	imited Liability Compar	ny is:	
LeBla	ise, LLC		
2. The name and the	Florida street address of	f the registered agent and office are:	
		00	
	John	Martinowich (Name)	
		(Name)	04 MAR -8
	99())	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ÁR
	100 000 Day	ndemere Way ess (P.O. Box <u>NOT</u> ACCEPTABLE)	8
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	Naples,	24105	7
****	(Cir	FL 31105 ty/State/Zip)	7: 45
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liability company at the registered agent and a statutes relating to the accept the abligation.	he place designated in the agree to actin this capace to actin this capace proper and complete be left my position as regist	o accept service of process for the above stails certificate, I hereby accept the appointments. I further agree to comply with the property and I am familiar tered agent as provided for in Chapter 608,	ent as visions of all with and
	(Signature) \$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

LEBLAISE, L.L.C.

was validly organized on March 20, 2002 as a Limited Liability Company. Said Limited

Liability Company is validly in existence under the laws of this state and has satisfied its annual filing voligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 8th day of January, 2004

Bureau of Commercial Services

,Director

