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Holland & Knight Requester's Name 315 So. Calhoun St Address 425-56 City/State/Zip CORPORATION NAME(S) &	75 Phone #		ice Use Omy	WATER STATE OF STATE
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Annual Report Fictitious Name	Rein:	ted Partnership statement emark		

Examinar's Initials

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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. Avantce', LLC (Name of foreign limited liability company)	
(Name of foreign timited habitity company)	
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-0052949 (FEI number, if applicable)	
4. May 29, 2003 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6. — ANUALY COY. (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	
7. 462 MOORING LINE Drive	
NAPLES FC 34/02 (Street address of principal office)	
8. If limited liability company is a manager-managed company, check here	
8. If Himted Hability Company is a manager-managed company, eneck nerve 25.	
9. The name and usual business addresses of the managing members or managers are as follows: Simon McMahon, 462 Mooring Line Drive, Airars Lode, 3/03 Leeward Lane, Naples FL 3410	NAPl4s 03
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: PROVIDE INVESTMENT	
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.)	sional Se vices
Symon M°MAMON 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 Limited Liability Company is:

(Signature)

	5 mon McMahon (Name)
	462 MOOTING LINE Drive Florida street address (P.O. Box NOT ACCEPTABLE)
(hadi	//ap/ES FC 34/02

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)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVANTCE", 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 FOURTEENTH DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVANTCE", LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF MAY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



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Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3169259

040437485 DATE: 06-14-04