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FOREIGN LIMITED LIABILITY COMPANY

Securesolutions, LLC

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Secure authors, LLC (Name of foreign limited liability company) 2. Delawaro (Junisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 04/23/2004 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 07/01/2004 (Date first transacted business in Florida, (See sections 608.501, 608,502, and 317,155, F.S.) 7. 200 Harry S. Truman Parkway, Suits 340, Annapolis, MD 21401 (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: SEE ATTACKMENT 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receives in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a funcion language in manufaction of the occiticate under oath of the manufactry must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Professional Security Services Signature of a member or an authorized representative of a member. (In accordance with section 408.408(1), F.S., the execution of this document constitutes an affirmation and at the penalties of perjury that the facts stated herein are true.)

Toll Poain

Typed of printed name of signee

Todd Pattison

Manager List

Todd Pattison Manager 200 Harry S. Truman Parkway Suite 340 Annapolis, MD 21401

T.M. Batchelor Manager 200 Harry S. Truman Parkway Suite 340 Annapolis, MD 21401

DIVISION OF CORPURATIONS

	· ·			DESIGNATION OF REGISTERED OFFICE			·
THE UNDER	usigned limite T to designat	D LIABILIT	Y COM	608.415 of 608.507, FLORIDA ST. PANY SUBMITS THE FOLLOWING AND REGISTERED AGE.	NG		
1. The name	of the Limited Lia	bility Compa	any is:				
<u> څيرونو</u>	salutions LL	<u>. </u>					
	•		if the reg	istered agent and office are:			
	C T Corporation S	System					
			(Name)				
	c/o C T Corporatio						
	Flo	rida street addr	cas (P.O. E	ox <u>NOT</u> acceptable)			
	Plantation		FL_	33324			
		(Ci	ty/State/Zi	p)			
liability compa	iny at the place des nt and agree to act ig to the proper an igations of my posi	signated in th this capat decomplete m	is certific sity. I fur erforman ered ages	service of process for the above state ate, I hereby accept the appointmenter agree to comply with the province of my duties, and I am familiar with as provided for in Chapter 608, I	sions of all vith and	04 JUN 28	DINISION OF CO
27: <u>41/1/1/</u>	(Signature)	sistant Vice-Pr <u>and Secrets</u>	esident	-		PH 12: 02	TARY OF STATIONS
•	V	\$ 100.00 \$ 25.00 \$ 30.00	Design	Fee for Application ation of Registered Agent ed Copy (optional) cate of Status (optional)		12)WS



I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SECURESOLUTIONS, 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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JUNE, A.D. 2004.

3794702 8300 040471919



Warriet Smita Hindan

DATE: 06-25-04