P.01/04

### Florida Department of State

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CORP	Time Wise Solut	ions, LLC	
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# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1		Time Wise Solut	ions, LLC	
· · · · · · · · · · · · · · · · · · ·		(Name of foreign limited)	iability company)	
	4			
(Jurisdicti	Maine ion under the law of which forei company is organized)	gn limited liability	(PEI number, if applicable)	<u></u>
· ——	(Date of Organization)		Perpetual pration: Year limited liability company will cca exist or "perpenual")	10 Of all
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<u> </u>	(Date first transacted busi	iness in Florida. (See section	# 608.501, 608.502, and 817.135, F.S.)	===
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·		Celebration, FL	1 (X 1)	<del></del>
		(Street address of princ		<u> </u>
. If limite	ed liability company is a m	anager-managed compa	my, check here 🗹	က က
The nar	me and usual business adde	resses of the managing r		5
	ney P. Rodrigue	<del>-</del>	vd., Celebration, FL 34747	
	iey F. Rudrigue	Lion Calentation Di	vd., Celebration, FL 34747	
				^
	हें का वर्षाकी क्योंकियाट विस्तंत्रस	ice, no more than 90 days old	, duly authenticated by the official having custody	of records
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## 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.

The name ar	d the Florida street address of the registered agent and office are:	SECRI	2004 AUG
	CT Corporation System		5
	(Name)	<u></u>	0
	1200 S. Pine Island Road		A S
	Florida succet address (P.O. Box NOT ACCEPTABLE)	-	St 42
	Plantation, Ft. 33324		٠٠
	(City/State/Zip)		

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)

RALVINA AMERITARI SECRETARI PERCIAL ASSISTARI SECRETARI

5.100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## State of Maine



## Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the records of formation, amendment and cancellation of articles of organization of limited liability companies and annual reports filed by the same.

I further certify that TIME WISE SOLUTIONS, LLC, formerly MSI PRODUCTS, LLC is a duly formed limited liability company under the laws of the State of Maine and that the date of formation is December 21, 2001.

I further certify that said limited liability company has filed annual records due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the articles of organization and that according to the records in the Department of the Secretary of State, said limited liability company is a legally existing limited liability company in good standing under the laws of the State of Maine at the present time.

In tastimony whereof, I have caused the Great Scal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this ninth day of August 2004.

DAN GWADOSKY

Secretary of State

Authentication: 3676-49

Mon Aug 09 2004 12:52:57