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(Requestor's Name)	
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PICK-UP WAIT MAIL	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	\neg
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DIVISION OF CONFIDENCE 19

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TRANSM	TTAL LETTER	
TO: Registration Section		
Division of Corporations		
SUBJECT: James Lee Witt Associates, LLC		
(Name of Limit	ed Liability Company)	
The enclosed "Application by Foreign Limited Liab	ility Company for Authorization to Transact Bu	reiness
Florida," Certificate of Existence, and check are sub	mitted to register the above referenced foreign	limited
liability company to transact business in Florida		
Please return all correspondence concerning this ma	tter to the following:	
	į	
Pate Felts		
(Nam	e of Person)	
	· •	
James Lee Witt Associates, LLC		
(Fire	n/Company) !	
1201 F Street, NW Suite 850		
	Address)	
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Washington, DC 20004	-	9
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Cityrata	c and Zip code)	AUG 24
For further information concerning this matter, plea	se call:	42
		- P
Pate Felts	at (202) 585 0780	PM 3:
(Name of Person)	(Area Code & Daytime Telephone Number)	
(Ivanie of Leibon)		, (
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
	j.	
Enclosed is a check for the following amount:	1 /	

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: James Lee Witt Associates, LLC (Name of Foreign Limited Liability Company) 2. State of Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Feb. 22, 2001 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) August 25, 2004 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1201 F Street, NW, Suite 850 Washington, DC 20004 (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: James Lee Witt 1201 F Street, NW, Suite 850 Washington, DC 20004 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, translation of the certificate under cath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Disaster Consulting Services. 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.)

Typed or printed name of signee

Pate Felts, Chief Operating Officer

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 Compar	ny is:		
James	Lee Witt Associates, L	<u>.</u>		
2. The name an	d the Florida street address of	the registered a	gent and office are:	
	National Corpor		ch, Ltd., Inc.	
		(Name)		
	103 N.	Meridian Stre	et	
	Florida street addre	ss (P.O. Box <u>NOT</u>	ACCEPTABLE)	- -
	Tallahassee	FL	32301	_
	(Cit	y/State/Zip)		
Having been na	ned as registered agent and to	accent service o	f process for the above	stated limited
	y at the place designated in thi			
agent and agree	to act in this capacity. I further	er agree to comp	ly with the provisions of	f all statutes
relating to the pi	roper and complete performan	ce of my duties, a	and I am familiar with a	nd accept the
obligations of m	y position as registered agent t	is provided for ii	n Chapter 608, Floria S	tatutes. 2
# /	0 0 11			모-
Waybe de	affinelli			22 (5)
7	(Signature)		, , , [ယ္ မြို့
				19

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional)

\$ 25.00

\$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JAMES LEE WITT ASSOCIATES, 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 TWENTIETH DAY OF AUGUST, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JAMES LEE WITT ASSOCIATES, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2001.

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

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3307601

DATE: 08-20-04