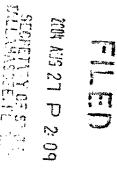
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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: <u>STORM GUA</u>	AD RESTORATION  ne of Limited Liability Company)
Florida," Certificate of Existence, and che liability company to transact business in I	
Please return all correspondence concerni	ing this matter to the following:
Allan	ing this matter to the following:    HERTLING   STORATION   LLC   STORATION   LLC
STORM GUAR	(Firm/Company)
411 35 57,	N. #100 (Address)
	Address)  Ale MIN. 56387  (City/State and Zip Code)
For further information concerning this m	natter, please call:
Allan HERTLIN (Name of Person)	G at (320) 257-5/5/ (Area Code & Daytime Telephone Number)
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
Enclosed is a check for the following amo	ount:
\$125.00 Filing Fee	ing Fee & \$\subseteq\$ \$155.00 Filing Fee & \$\subseteq\$ \$160.00 Filing Fee, Certificate or Status & Certified Copy of Status & Certified Copy

#### 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. STORM GUARD RESTORATION LLC
(Name of Foreign Limited Liability Company)

2. MINNESOTA

3. 33-1055489

	MINVESOTA  3. 33-1055489  Jurisdiction under the law of which foreign limited liability (FEI number, if application pany is organized)	ble)		<u>.</u>
4.	3/24/03   5.   PERPETURY \( \text{(Duration: Year limited liability compexist or "perpetual")}	pany will	ceass to	-
6.	N/A  Oate first transacted business in Florida, if prior to registration.)		AUS 2	1 1 
7.	(See sections 608.501 & 608.502 F.S. to determine penalty liability)  4// 3 4 57. N. #/00		יי ד	
,	WHITE PARK, MN. 56387 (Street Address of Principal Office)		2: 08	<u>.</u>

- 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 LINEHAN - 2727 N. John Young PARKWAY # F, KISSIMMEE FL. 34741

JAMES BAMSAY - 2727 N. John Young PARKWAY, KISSIMMEE, FL. 34741

Allan HERTLING - 411 35 ST. N. #100, WAITE PARK, MN 56387

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 eath of the translator must be submitted.)

11.	Nature of business or purposes to be conducted or promoted in Florida: SALES AND
	MANAGEMENT of HOME IMPROVEMENTS
	Alfon Hertling
	Signature of a member of an authorized representative of a member.  (In accordance with section 608.408(3), F.S., the execution of this document constitutes

ALLAN HERTLING

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.

STORM GUARD RESTORATION LLC		
2. The name and the Florida street address of the registered agent and office are:	2004 AUG 2	
JAMES LINEHAN SE	27	المنامة ا ا
(Name)	U	M
2727 N. John Young PARKWAY #F	~	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	09	
KISSIMMEE FL 34741	,	,
City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited 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, Florida Statutes.

Jug. lufer
(Signature)

1. The name of the Limited Liability Company is:

\$ 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 Minnesota

### **SECRETARY OF STATE**

Certificate of Good Standing

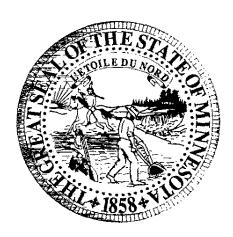
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State or the listed below; the limited liability company is governed by Chapter 322B of Minnesota Statutes; and this limited liability company is authorized to do business as a limited liability company at the time this certificate is issued.

Name: Storm Guard Restoration LLC

Date Formed or Registered: April 24, 2003

State of Organization: Minnesota

This certificate has been issued on August 23, 2004.



Mary Hiffmayer

Secretary of State.