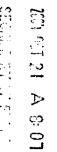
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#### EXECUTIVE CORPORATION

Incorporating the World, One Company at a Time™

P.O. Box 1233

Marco Island, Florida 34146

E-Mail: Info@ExecutiveCorporation.com
Website: www.ExecutiveCorporation.com

Place The + Return

MARC.

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: K.P. & Assoc., LLC	aited Lighility Company)
(Name of Lin	nited Liability Company)
	ability Company for Authorization to Transact Business in ubmitted to register the above referenced foreign limited
Please return all correspondence concerning this r	natter to the following:
Marc Scola	
(Na	nme of Person)
Executive Corporation	
(Fì	rm/Company)
PO Box 1233	84 N
	(Address)
	The state of the s
Marco Island, Florida 34146	0
(City/Si	tate and Zip Code)
For further information concerning this matter, ple	ease call:
Marc Scola	at (_239) _389- 6111
(Name of Person)	(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 amount:	

☐ \$130.00 Filing Fee & Ø \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy of Status & Certified C

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:

K.P. & Assoc., LLC	Name of Foreign I	imited Liability Company)	
	(Ivalic of Foleigh L	inned Liability Company	
California	- <del> </del>	3. (FEI number,	
(Jurisdiction under the company is organized	e law of which foreign limited li	ability (FEI number,	if applicable)
June 7, 2004		5. perpetual	
(Date o	of Organization)	(Duration: Year limited lia exist or "perpetual")	bility company will cease to
	(Date first transacted busine (See sections 608.501 & 608.	ess in Florida, if prior to registration.) .502 F.S. to determine penalty liability)	
5 River Road Suit	re 303		F4 8
Wilton, CT 06897			
	(Street	Address of Principal Office)	Fri-<:
If limited liability	y company is a manager-m	anaged company, check here	
The name and us	ual business addresses of t	he managing members or manage	ers are as follows:
			·
Karen Pettigrew,	5 River Road Suite 303, W	filton, CT 06897	
). Attached is an origin	al certificate of existence, no more	e than 90 days old, duly authenticated by the	ne official having custody of re
		photocopy is not acceptable. If the certific	ate is in a foreign language, a
instation of the certifica	ate under oath of the translator mu	st be submitted.)	
		/ 1	
1. Nature of busin	ess or purposes to be cond	acted or promoted in Florida:	
Wed Kil	KK INWARS		
V	XIA		
	Signature of a member of	or an authorized representative of	a member.
	(In accordance with section 608	3.408(3), F.S., the execution of this documenties of perjury that the facts stated herein are	t constitutes
	Karen Pettigrew		
		r 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.

K.P. & Assoc., LLC	_	
1. The name of the Limited Liability Company is:	K.F	& Assoc., LLC
	1.	The name of the Limited Liability Company is:

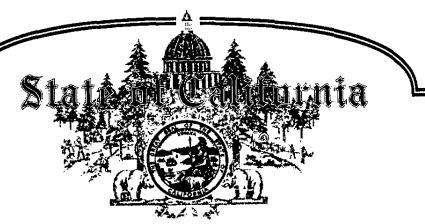
2. The name and the Florida street address of the registered agent and office are:

	(Name)	23	130	£
771 South Barfield Drive		The second secon	3	* .
Florida Street Addre	ess (P.O. Box NOT ACCEPTABLE)	Particular of the control of the con	21 A	
Marco Island	FL 34145		က်	- <b>48</b> 00
Marco Island	FL 34145 City/State/Zip	. ;		0.0

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.

(Signature)

\$ 10	00.00	Filing Fee for Application
\$ 2	25.00	Designation of Registered Agent
\$ 3	30.00	Certified Copy (optional)
\$	5.00	Certificate of Status (optional)



#### SECRETARY OF STATE

## CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the **7th day of June, 2004, K.P. & ASSOCIATES, LLC**, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good egal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 6, 2004.

KEVIN SHELLEY Secretary of State