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FOREIGN LIMITED LIABILITY COMPANY

NMP, LLC

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

NMP, LLC	;			
	(Name of For	eign Limited Lis	ibility Company)	
Delaware		3.		····
urisdiction under the	e law of which foreign lim l)	nited liability	(FEI number, if applicable)	
June 30, 2004		\$.	perpetual	
(Date)	of Organization)		(Duration: Year limited liability company exist or "perpetual")	will coase to
upon filing				
-	(See sections 608,501 4		ida, if prior to registration.) o determine penalty liability)	
71 Eagreen Point Bo	ulevard	- <u></u>		
Gloucester, MA 019	930			*1.
	(5	beel Address o	Principal Office)	
If limited liability	y company is a manag	er-managed c	ompany, check here	;
The name and us	ual business addresses	of the manag	ging members or managers are as follo	ows:
		and Glouretter	MA 01930	ريز تخ.
Domenic Mammola	, // Eastern Point Boulevi	CONT. CALCULATION SACRE		
	is 71 Eastern Point Bouleverd, G			
	<u> </u>			AHASSEE
Patrick Brady, 71 E	iastem Point Bouleverd, G	laucester, MA. (21930	AHASSEE, FL
Patrick Brady, 71 E Attached is an original jurisdiction under the	iastem Point Bouleverd, G	laucester, MA. (more than 90 da (A photocopy i	ys old, duly autheoricated by the official having snot acceptable. If the certificate is in a fireign	
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Patrick Brady, 71 E Attached is an original jurisdiction under the slation of the certifical Nature of business	estern Point Bouleverd, G el certificate of existence, no law of which it is organized the under each of the translate ess or purposes to be of the business consisting of d Signature of a memi- (In accordance with section	more than 90 da (A photocopy is condented or p esigning, market ther or an auth to 608.408(3) F.S. condition of porjury	ys old, duly authoriczned by the official having snot acceptable. If the certificate is in a fixeign ted.) oromoted in Florida: To own, lease and coing and licensing marketing programs for NA	language a

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608,415 of 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.

l. The name of the Lin	nited Liability Compa	my is:			
NMP, LLC					
2. The name and the F	lorida street address o	f the registered ag	ent and office ar	re:	
	cte	Corporation System			
		(Name)			
	1200 South Pine Island Road				
	Florida Street Addre	es (P.O. Box <u>NOT</u> A	CCEPTABLE)		
·· •	Plantation	FL City/State/Zip	33324		
		Assis demonstration			
laving been named as r lability company at the gent and agree to act in elating to the proper on bligations of my positio	place designated in thi this capacity. I furthe d complete performant	s certificate, I here er agree to comply ce of my duties, an	by accept the app with the pravisio I I am familiar w	pointment as registered sms of all statutes in the statutes in	
or the H		TRACI HOUCK ASSISTANT SECHETARY		29 // 8: 30 SEE FLORIDA	

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NMP, 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 TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2004.

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

Varriet Smith Windson

AUTHENTICATION: 3438931

DATE: 10-27-04

DOES COEESSE

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