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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. ROBSEN ENTURES LLC (Name of Foreign Limited Liability Company)	
2. New Hampshire (Jurisdiction under the law of which foreign limited liability company is organized) 3. 03-0538493 (FEI number, if applicable)	
4. AUGUST 60, 2001 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")	
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7 AR ANTRIM B. FE &	
HANCOCK, NH 03449 (Street Address of Principal Office) SER 30	7
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:	}
VIRGINIA N. ROBITAILLE, MANACER	
P.O. Box 875	
HANCOCK, NH 03449-0275	_
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 ranslation of the certificate under oath of the translator must be submitted.)	
Nature of business or purposes to be conducted or promoted in Florida:	_
LEASE OF POLG FIELD	
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.)	
VIRCINIA N. KOBITAILUE, MANAGER Typed or printed name of signee	
typed of printed name of signed	

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 Company is:	
ROBSEN VENTURES LLC	
2. The name and the Florida street address of the registered agent and office are:	
Clarence F. Frazier c/o Purcell Flanagan & Hay, P.A. (Name)	
1548 Lancaster Terrace	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Jacksonville FL 32204 75 25 25 25 25 25 25 25 25 25 25 25 25 25	
Having been named as registered agent and to accept service of process for the above state of the 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)	

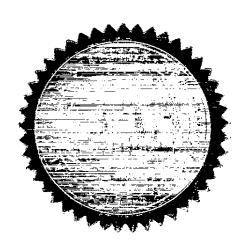
\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

State of New Hampshire Department of State

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that ROBSEN VENTURES, LLC is a New Hampshire limited liability company formed on AUGUST 20, 2001. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that a certificate of cancellation has not been filed.

SECRETARY OF STATE



IN TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 15TH day of DECEMBER, A.D. 2004

William M. Gardner Secretary of State