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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: CRAdine Systems, LCC (Name of Limited Liability Company)
(Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Person)
(Firm/Company) P.O. Box 603
(Firm/Company)
150 Old HICHWAY 98 East
(Address)
Columbia, Ms 39429 (City/State and Zin Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
To HN HARVEY at (60) 736-3449 (Name of Person) (Area Code & Daytime Telephone Number)
(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:
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certificate of 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. Canding Systems, CCC (Name of Foreign Limited Liability Company) 20-1884671 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) company is organized) 11-22-04 PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) WATER PARK LANE: P.O. BOX 108. Columbia MS 39429 (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: JASON LEE 9311 PINE FORREST ROAD PMB *2 PENSACOLA 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 oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: DEMOLITION : CLEARING

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

JEFF PENNINGTON

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.

z. The hang a	nd the Florida street add	LEE	agent and office are:	ฎเ ทั ร
		(Name)		田豆
	9311 PINE 1	Forrest Road	PMB #2	FEB-2
	Florida Stree	et Address (P.O. Box NO	T ACCEPTABLE)	
	PENSACOLA	FL	39534	AMIL: 00
		City/State/Zip		<u>-</u>
Havino heen na	med as registered agent	and to accept service a	of process for the above sta	sted limited
			ereby accept the appointme	
agent and agree	to act in this capacity	I further agree to comp	ply with the provisions of a	ll statutes
			and I am familiar with and	

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

State of Mississippi

Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

GRADING SYSTEMS, LLC

Formed November 18, 2004

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

27 WATER PARK LANE PO BOX 108 COLUMBIA MS 39429

and that the registered agent at that address is:

PENNINGTON, JEFF

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

ABY OF MISSES

Given under my hand and seal of office November 22, 2004

Tric Clark

ERIC CLARK Secretary of State

Certification Number: 6781315-1 Page 1 of 1 Reference: Vicky Stringer (vs) Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/verify