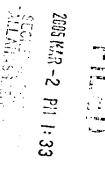
M0500000 1088

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
M89 1044 621 1047 1071
789, 167, 600, Office Use Only 32
789, 161, 631, 647, 671 789, 161, 621, 671 WX 19957



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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 24, 2004

ALAN H. ROGERS PO BOX 27085 MACON, GA 31221

SUBJECT: DIGITAL DATA SYSTEM INTEGRATOR LLC

Ref. Number: W04000019957

2005 KIR - 2 FII 1: 33

We have received your document for DIGITAL DATA SYSTEM INTEGRATOR LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 004A00036200



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 21, 2004

ALAN H. ROGERS PO BOX 27085 MACON, GA 31221

SUBJECT: DIGITAL DATA SYSTEM INTEGRATOR LLC

Ref. Number: W04000019957

We have received your document for DIGITAL DATA SYSTEM INTEGRATOR LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 904A00041011

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. Digital Data System Integrator LLC Name of foreign limited liability company)
2. CHOYO'LO 3. 56-2450097 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)
4. 3-19-09 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cesse to exist or "perpetual")
(Date of Organization) (Duration: Year limited that they company with coast to exist or "perpetual")
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.Q.)
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.1)
7. 18 mill Street
10 C (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Jackson GA 30233 (Street address of principal office)
8. If limited liability company is a manager-managed company, check here
O. The name and anothering address of the managine members as managers are as follows:
9. The name and usual business addresses of the managing members or managers are as follows:
Alan H. Rosers P.D. Box 27085 maion, G.A 31221
Alan H. Rogers P.D. Box 27085 macon, GA 31221 William S. Hoard P.O. Box 27085 macon, GA 3122
·
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: <u>Satellite dish</u>
installation
W.S. Govern
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.)
William S. Hoard
. 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.

1. The name of the Limited Liability Company is:		
Digital Data System Integrator	SILL	
2. The name and the Florida street address of the registered agent and office are:		
William S. Hoard (Name)	2005 MAR SECRETA	
Florida street address (P.O. Box NOT ACCEPTABLE)	-2 PH	
Tallahasser FL 32308 (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, F.S.

(Signature)

42.S. R

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 042090425 CONTROL NUMBER : 0418838 DATE INC/AUTH/FILED: 03/22/2004 JURISDICTION : GEORGIA PRINT DATE : 07/27/2004

FORM NUMBER : 211

DIGITAL DATA SYSTEM INTEGRATORS LLC JULIE EPPERSON POB 27085 MACON, GA 31221

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

DIGITAL DATA SYSTEMS INTEGRATORS, LLC A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Cathy Cox Secretary of State