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SECRETARY DE STATE



ACCOUNT NO. : 072100000032

REFERENCE: 481659

7462312

AUTHORIZATION

COST LIMIT :

\$ \$125.00

ORDER DATE: July 13, 2005

ORDER TIME: 9:43 AM

ORDER NO. : 481659-035

CUSTOMER NO: 7462312

CUSTOMER: Mr. Terry Delong

Mr. Dave Foster 21 Congress Street

Saratoga Spring, NY 12866

FOREIGN FILINGS

NAME: ARIES TITLE SERVICES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX____PLAIN STAMPED COPY

CONTACT PERSON: Denise Mick -- EXT# 2950

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 1 ARIES TITLE SERVICES LLC (Name of Foreign Limited Liability Company) 2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 4. 11/17/2004 PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.)
(See sections 608 501 & 608 502 F S to determine penalty liability) 8. If limited liability company is a manager-managed company, check here X 9 The name and usual business addresses of the managing members or managers are as follows: 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 conflicate under oath of the translator must be submitted.) 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)

Typdd or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

UNDERSIGN	NED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT INTELLIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN THE STATE OF INTELLIABLE AND REGISTERED AGENT IN THE STATE OF	
1. The name	e of the Limited Liability Company is:	
ARIES TITLE	e Services Lic	
2. The name	e and the Florida street address of the registered agent and office are:	
	Patricia Stoliker	
	(Name)	
	1025 S Semoran Blvd, Suite 222	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Winter Park, FL 32792	
	City/State/Zip	
liability comp agent and agr relating to the	named as registered agent and to accept service of process for the above stated limited pany at the place designated in this certificate, I hereby accept the appointment as register ree to act in this capacity. I further agree to comply with the provisions of all statutes a proper and complete performance of my duties, and I am familiar with and accept the fam position as registered agent as provided for in Chapter 608, Florida Statutes. Saliker (Signature)	ređ

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ARIES TITLE SERVICES 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 FOURTEENTH DAY OF JULY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARIES TITLE SERVICES LLC" WAS FORMED ON THE SEVENTEENTH DAY OF NOVEMBER,
A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4019378

DATE: 07-14-05

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