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Account Name : AGENTS AND CORPORATIONS, INC

Account Number : I20010000112 Phone : (302)575-0875

Fax Number : (302) 575-0925

05 OCT -4 AM 8: 06
JIVISION OF CURPORATION

FOREIGN LIMITED LIABILITY COMPANY

PO, LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$125.00

2005 OCT -4 AM 8: 45
SECRETARY OF STATE

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10/4/2005

302-575-0925 302-575-0925

T-810 P.002 F-460 T-804 P.002/002 F-454

Sct-04-2005 02:18pm From-DAVID WILLIAMS LAW FIRM PA

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

PO, LLC	n Limited Liability Co.		
(Nume of Forms	n Limited Liemity Co	mhana)	
tion under the law of which foreign limits	3	MAAW	
don under the law of which foreign limits is organized)	d lisbiffy	(FHI number, i	spplicable)
July 27, 2005	r Pe	rpetual	
(Date of Organization)	(Duren	on: Year limited liab	iny company will cease to
	extist o	r "perpenua!")	
Upon Qualification			
(Date first transacted but (See sections 608-501 & c	dness in Florida, if prid 08.502 F.S. to determi	or to registration.) ne negaty liability)	
2110 Artesia Blvd. #383			
Redondo Beach, CA 90278			
	et Address of Principa	Office)	
4 - 2 37-7-2424		abanis bara 🗀	
ted liability company is a manager	managed company	, check here []	
ame and usual business addresses o	f the managing me	mbers or manager	s are as follows:
		•	
Kenneth Vida	Renes Vi	da	
2110 Artasia Blvd. #385	2110 Arte	eia Blvd. #383	5
2110 Artesia Blvd. #385	2110 Arte	sia Blvd. #38:	5
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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:			
	PO, LLC			
2.	The name and the Florida street address of the registered agent and office are:			
	A			
	Agents and Corporations.Inc. (Name)			
Suite E, 773 4th Avenue North Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Naples FI 34102 City/State/Zip			
	City, Dial-4 Lip			

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, 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)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PO, 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 FOURTH DAY OF OCTOBER, A.D. 2005.

SECRETARY OF STATE ASSESSED AS STATE AS SECRETARY OF STATE AS SECRETARY.



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DATE: 10-04-05