M05000005719

(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:

Office Use Only



500060148365

TILED

OF OCT 12 PH 12: 46

SECHELSSEE, FLORIDA





ACCOUNT NO. : 072100000032 REFERENCE: 645775 AUTHORIZATION : COST LIMIT : ORDER DATE: October 11, 2005 ORDER TIME : 9:59 AM ORDER NO. : 645775-005 CUSTOMER NO: 7115859 FOREIGN FILINGS NAME: ALASKA EASTERN NEWCO, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY _ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER:

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:

	(Name of Fo	oreign Limited Li	iability Company)	· · · · · · · · · · · · · · · · · · ·	
LASKA		2	94-3311822		
	law of which foreign li	mited liability 3,	(FE	I number, if app	olicable)
SEPTEMBER 23, 1	.998 f Organization)	5.	PERPETUAL		
(Date o	Organization)		(Duration: Year exist or "perpetu	limited liability al")	company will cease to
	(Date first transacted (See sections 608.501	d business in Flor & 608 502 F S	rida, if prior to regist to determine penalty	tration.)	
202 ETEMI OMDEI				naomey)	
323 FIFTH STREE	ET, EUREKA, CA	A220T		*	· ·
		(Street Address c	of Principal Office)		· · -
			,		
If limited liability	company is a mana		- ,	here 🗸	
·		ger-managed	company, check I	_	
·	company is a mana	ger-managed	company, check I	_	e as follows:
The name and usu	al business addresse	ger-managed o	company, check I	_	e as follows:
The name and usu		ger-managed o	company, check I	_	e as follows:
The name and usu	al business addresse	ger-managed o	company, check I	_	e as follows:
The name and usu	al business addresse	ger-managed o	company, check I	_	e as follows:
The name and usu SECURITY NATIO 323 FIFTH STRE	al business addresson	ger-managed o	company, check I	_	e as follows:
The name and usu SECURITY NATIO 323 FIFTH STRE EUREKA, CA 95	al business addressenal master manageret	es of the mana	company, check I	managers are	
The name and usu SECURITY NATIO 323 FIFTH STRE EUREKA, CA 95 Attached is an original	al business addresse NAL MASTER MANAG EET 501 certificate of existence, n	es of the mana	company, check I	managers are	ial having custody of rec
The name and usu SECURITY NATIO 323 FIFTH STRE EUREKA, CA 95 Attached is an original jurisdiction under the la	al business addressonal master management 501 certificate of existence, naw of which it is organize	es of the mana GER, LLC no more than 90 da ed. (A photocopy	ays old, duly authentic	managers are	ial having custody of rec
The name and usu SECURITY NATIO 323 FIFTH STRE EUREKA, CA 95 Attached is an original jurisdiction under the la	al business addresse NAL MASTER MANAG EET 501 certificate of existence, n	es of the mana GER, LLC no more than 90 da ed. (A photocopy	ays old, duly authentic	managers are	ial having custody of rec
The name and ususe SECURITY NATION 323 FIFTH STREEUREKA, CA 95 Attached is an original jurisdiction under the lastation of the certificate	al business addressonal Master Manager ET 501 certificate of existence, no aw of which it is organized and of the translated and the translated	es of the mana GER, LLC no more than 90 de ed. (A photocopy ator must be subm	ays old, duly authentic is not acceptable. If t	managers are	ial having custody of rec a foreign language, a
The name and usus ECURITY NATION 323 FIFTH STREEUREKA, CA 95 Attached is an original jurisdiction under the last in station of the certificate station.	al business addressonal master management 501 certificate of existence, naw of which it is organize	es of the mana GER, LLC no more than 90 de ed. (A photocopy ator must be subm	ays old, duly authentic is not acceptable. If t	managers are	ial having custody of rec a foreign language, a
The name and usus ECURITY NATION 323 FIFTH STREEUREKA, CA 95 Attached is an original jurisdiction under the landstation of the certificate states.	al business addressonal Master Manager ET 501 certificate of existence, no aw of which it is organized and of the translated and the translated	es of the mana GER, LLC no more than 90 de ed. (A photocopy ator must be subm	ays old, duly authentic is not acceptable. If t	managers are	ial having custody of rec a foreign language, a
The name and ususe SECURITY NATION 323 FIFTH STREEUREKA, CA 95 Attached is an original jurisdiction under the lastation of the certificate	al business addressonal Master Manager ET 501 certificate of existence, no aw of which it is organized and of the translated and the translated	es of the mana GER, LLC no more than 90 de ed. (A photocopy ator must be subm	ays old, duly authentic is not acceptable. If t	managers are	ial having custody of rec a foreign language, a
The name and ususe SECURITY NATION 323 FIFTH STREEUREKA, CA 95 Attached is an original jurisdiction under the lastation of the certificate	al business addressonal Master Manager ET 501 certificate of existence, no aw of which it is organized and of the translated and the translated	es of the mana GER, LLC no more than 90 de ed. (A photocopy ator must be subm	ays old, duly authentic is not acceptable. If t	managers are	ial having custody of rec a foreign language, a

NATIONAL MASTER MANAGER, LLC, ITS MANAGER

Typed or printed name of signee

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of periury that the facts stated herein are true ALLAN GRUSHKIN, SENIOR VICE PRESIDENT OF SECURITY

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.

. The name	of the Limited Liability Con	npany is:
***	ALASKA EASTERN NEW	CO, LLC
. The name	and the Florida street addres	ss of the registered agent and office are:
	Corporation Service	Company
		(Name)
	1201 Hays Street	· · · · · · · · · · · · · · · · · · ·
	Florida Street A	address (P.O. Box NOT ACCEPTABLE)
	Tallahassee	FL 32301
		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, Florida Statutes.

Corporation Service Company

By: (Signature)

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

Alaska Entity # 64828D

State of Alaska Department of Commerce, Community, and Economic Development

CERTIFICATE OF GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

ALASKA EASTERN NEWCO, LLC.

on the 23rd day of September, 1998 filed in this office its Articles of Organization for a Limited Liability Company organized under the laws of this state.

I FURTHER CERTIFY that said Limited Liability Company is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 4th day of October, 2005.

Julian Onel

Edgar Blatchford Commissioner

Certification Number: 69988-1 Verify this certificate online at https://myalaska.state.ak.us/business/soskb/venfy.asp