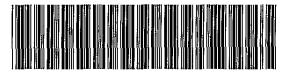
# M050000063355

(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:	7





100059725411

09/20/05--01027--001 \*\*87.50

11/09/05--01028--000 \*\*72.50

FILED

2005 NOV 16 PH 2: 03

CALLAHASSEE, FLORIDA

W05-45052

A DEP 2 9 2005.

#### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: MS Cor (Name of Limit	P LLC led Liability Company)			
	oility Company for Authorization to Transact Business in omitted to register the above referenced foreign limited			
Please return all correspondence concerning this ma	atter to the following:			
Policarpo Gu	errero ne of Person)  Proposition of Person			
	ne of Person)			
MS Corp LLC				
(Firm/Company)				
10100 W. Sample Road, Suite 308				
(Address)				
Coral Springs, Florida. 33065 (City/State and Zip Code)				
(City/Sta	te and Zip Code)			
For further information concerning this matter, please call:				
Policarpo Guerrero (Name of Person)	at ( <u>954</u> ) <u>757 1560</u> (Area Code & Daytime Telephone Number)			
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount:  \$\Bigsiz\$\$\$\$\$\$125.00 \text{ Filing Fee}\$	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate tatus Certified Copy of Status & Certified Copy			
Enclosed is a Money Order for	\$.72.50			



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 29, 2005

POLICARPO A. GUERRERO MSCORP LLC 10100 W. SAMPLE ROAD, SUITE 308 CORAL SPRINGS, FL 33065

SUBJECT: MSCORP LLC Ref. Number: W05000045052

We have received your document for MSCORP LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$72.50.

You completed the wrong form,

We are enclosing the proper form(s) with instructions for your convenience.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

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) 245-6043.

Letter Number: 005A00059436

Joey Bryan Document Specialist PM 2: 04 SEE, FLORIDA

### 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 FOREIG LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. MSCorp LLC (Name of Foreign Limited Liability Company)
(Name of Foreign Limited Liability Company)
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)
4. May 7th 2004  (Date of Organization)  (Duration: Year limited liability company will care to exist or "perpetual")
6. Upon qualification  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 10100 W Sample Pood Suite 308
1. Tolor VV. Saltiple House, Salte Doo
Coral Springs, Florida, 33065 (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:
Policarpo Guerrero
10100 W. Sample Road, Suite 308
Policarpo Guerrero 10100 W. Sample Road, Suite 308  Coral Springs, Florida, 33065
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 ranslation of the certificate under eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
Contents Distribution (Internet)
Halux
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.)
Policarpo Guerrero

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:	District Page
MSCorp LLC	产5 5 0
2. The name and the Florida street address of the registered agent and office are:	HASSER PE
Policarpo Guerrero	7. O
(Name)	RIONS
10100 W. Sample Road, Suite 308 Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Coral Springs FL 33065	_

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.

\$ 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 "MSCORP 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 SEVENTH DAY OF OCTOBER, A.D. 2005.

FILED
2005 NOV 16 PM 2: 04



Warriet Smith Windson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4213157

DATE: 10-07-05

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