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To:

Division of Corporations

Fax Number

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Pax Number : (850)878-5926

WFOR	EIGN LIMITED LIA		PANY	
OF CC	Five Rivers Services, LLC			
	Certificate of Status	0		
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	Estimated Charge	\$125.00	•	

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

IN COMPLIANCE WITH SECTION GOLSON, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO RECESSER A FOLLOWING INSULATION OF THE STATE OF FLORIDA: 1. Five Givers Securces, LLC		
(Name of Foreign Limited Liability Company)		
2 Alaska 3. 32-0162043		
(Jurisdiction under the law of which foreign limited liability (Fill number, if applicable) company is organized)		
4 Oct 1,2005 & Perpetual		
(Date of Organization) (Duration: Year limited liability company will ocase to exist or "perpetual")		
6. Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. 5475 Mark Dabling Blud #305	~	9
Colorado Springs, CD 80918	O 500%)JVISIC
8. If limited liability company is a manager-managed company, check here	I 33	
9. The name and usual business addresses of the managing members or managers are as follows: (Olin Schme) seer 5475 Mark Debling Blod #305, Colo Seps CO 80	· 圣后: 45	CORPORATIONS
10. Attached is an original certificate of existence, no more than 90 days old, only 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 cois in a foreign language, a translation of the certificate under eath of the translator must be submitted.)		
11. Nature of business or purposes to be conducted or promoted in Florids: (SOUR MART		
Contractor Patrick AFB		
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	r	
an affirmation under the penalties of perjury that the facts stated herein are true.) Colin Schmeisser		
Typed or printed name of signee		
·		

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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:	
Five Rivors Services, LC	<u>.</u>
2. The name and the Florida street address of the registered agent and office are:	
CT Comparation System.	
(Name)	
1200 South Pine Island Road	_
Florida Street Address (P.O. Box NOT ACCEPTABLE)	-
Plantation, Florida 33324	
City/State/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 can familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

CT Corporation System

Hiedi Llesch Assistant Secretary

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

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Alaska Entity # 96212

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 Aleska, and custodian of corporation records for said state, hereby certifies that

FIVE RIVERS SERVICES, LLC

on the 22nd day of September, 2005 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 16th day of December, 2005.

Julia Gall

William C. Noll Commissioner

Certification Number: 88417-1 Verify this contificate online at https://mysleska.state.ak.us/bosiness/sogth/verify.asp