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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

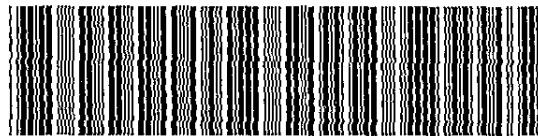
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SECRETARY OF STATE  
TALLAHASSEE, FLA.

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FLORIDA  
DEPARTMENT OF  
STATE  
REGISTRATION  
AND  
LICENSES  
TALLAHASSEE, FLA.



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 795451 4332941

AUTHORIZATION : *Lynne DeLoach*

COST LIMIT : \$ 125.00

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ORDER DATE : January 5, 2006

ORDER TIME : 9:46 AM

ORDER NO. : 795451-005

CUSTOMER NO: 4332941

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FOREIGN FILINGS

NAME: D. FOWLER, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: \_\_\_\_\_

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2006 JAN - 9 PM 2:20

SECRETARY OF STATE  
TALLAHASSEE 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 FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. D. FOWLER, LLC SECRET  
100 JAN 2005  
T-1  
(Name of Foreign Limited Liability Company)
2. New Jersey 20-2790419 SECRET  
T-1  
(Jurisdiction under the law of which foreign limited liability  
company is organized)
3. 20-2790419 SECRET  
T-1  
(FEI number, if applicable)
4. Apr. 128, 2005 SECRET  
T-1  
(Date of Organization)
5. Perpetual SECRET  
T-1  
(Duration: Year limited liability company will cease to  
exist or "perpetual")
6. No business yet transacted  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 5540 North Harbor Village Drive #104  
Vero Beach, Florida 32967  
(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:

David S. Fowler  
5540 North Harbor Village Drive #104  
Vero Beach, Florida 32967

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 certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

Investment Holdings and Consulting Services  
David S. Fowler

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.)

David S. Fowler  
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:

D. FOWLER, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street 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: Tabatha Miller, Asst VP  
(Signature)

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

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

D. FOWLER, LLC  
0600235181

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on April 28, 2005.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and registered office are:*

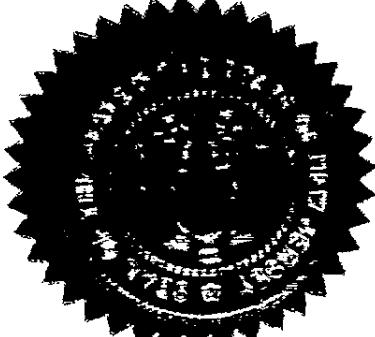
David S. Fowler  
10 William Street  
Rumson, NJ 07760

*Continued on next page . . .*

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

D. FOWLER, LLC

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
6th day of January, 2006



*John E McCormac*

John E McCormac, CPA  
State Treasurer