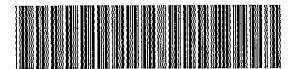
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#### **COVER LETTER**

	tration Section ion of Corporations		·	
SUBJECT:	GECKO ENTERPRISES, LLC			
		ited Liability Company)		
Florida," Cert	"Application by Foreign Limited Lia tificate of Existence, and check are su pany to transact business in Florida	bility Company for Authorization t bmitted to register the above refere	o Transact Business in enced foreign limited	
Please return	all correspondence concerning this m	atter to the following:		
LOUIS M. MEINERS, JR.				
	(Na	me of Person)		
	ADVOCATE	CONSULTING	TASE 05	
	(Fir	m/Company)	100 m	
	9229 DELEGAT	ES ROW, SUITE 245	28 P	
		(Address)	Fo w	
	<del></del>	OLIS, IN 46240	PH 3: 44	
	(City/Sta	ate and Zip Code)	,	
For further in	formation concerning this matter, ple	ase call:		
	RACHEL HALL	at ( 317 ) 581-4077		
	(Name of Person)	(Area Code & Daytime Telepl	hone Number)	
Divisi P.O. I	LING ADDRESS: ion of Corporations Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	check for the following amount: 5.00 Filing Fee \$\square\$\$\$\$130.00 Filing Fee & Certificate of		Filing Fee, Certificate of Status & Certified Copy	

### 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:

GECKO ENTERPRISES, LLC	4-4
(Name of Foreign Limited Liability Company)	
2. DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	<u> </u>
company is organized)	
4. NOVEMBER 17, 2005 5. PERPETUAL	:
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	ı
6. DECEMBER 1, 2005	4 11-
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 1897 RIVERSIDE DRIVE	
BULLHEAD CITY, AZ 86442	
(Street Address of Principal Office)	-17
8. If limited liability company is a manager-managed company, check here	Table 1
9. The name and usual business addresses of the managing members or managers are as follows:	Economic Services
DR. EDWARD GRECO	en .
1897 RIVERSIDE DRIVE	• 
BULLHEAD CITY, AZ 86442	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of a 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:	<u></u>
EQUIPMENT LEASING A	<u>-</u> - 14
Louis M. Meisers M	
Signature of a member or an authorized representative of a member.	3 :-
(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.)	
LOUIS M. MEINERS, JR.	
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:

#### GECKO ENTERPRISES, LLC

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

LOUIS M. MEINERS, JR.

(Name)

2640 GOLDEN GATE PARKWAY SUITE 205

Florida Street Address (P.O. Box NOT ACCEPTABLE)

NAPLES

er 34105

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.

\$ 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

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GECKO ENTERPRISES, 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 EIGHTEENTH DAY OF NOVEMBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GECKO ENTERPRISES, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF NOVEMBER, A.D. 2005.





Darriet Smith Hindson
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4308817

DATE: 11-18-05

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