M06000000345

	· · · · · ·				
(Requesto	r's Name)				
(Address)					
(Address)					
(City/State,	/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Business	Entity Name)				
:					
(Document Number)					
Certified Copies	Pertificates of Status				
Special Instructions to Filing Officer:					
31					

Office Use Only



300063537803

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 1333 N. DUVAL STREET, TALLAHASSEE, FL 32303 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

01-20-06

NAME:

SRA OPERATING COMPANY, LLC

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST:

\$125 + \$30 + \$5= \$160

RETURN: CERTIFIED COPY & GOOD STANDING

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOLLOWING IS SUBMITTED TO REGISTER A FOLLOWING IS SUBMITTED TO REGISTER A FO

	(tanile of Lotellin Pinnier	Li	ibility Company)
ieorgia		3	51-0563607
	the law of which foreign limited liability rd)		(FRI number, if applicable)
December 9, 200	5	ς	Perpetual
	of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
Upon qualificatio			
	(Date first transacted business in I (See sections 608.501 & 608.502 F.	S. i	da, if prior to registration.) o determine penalty linbility)
5871 Glenridge D	rive, Sulte 400, Atlanta, Georgia 303	327	
		_	
	(Street Address	s of	Principal Office)
Climitart tinl-11	tu aamanan la a	.1	
i minicu ngom	ty company is a manager-manage	u C	outhand, encog ucto is i
Jonathan D. Bar	ry, 5871 Glenridge Drive, Suite 400,	Atla	inta, Georgia 30327
Jonathan D. Bar	ry, 5871 Glenridge Drive, Suite 400,	Atia	inta, Georgia 30327
Jonathan D. Bar	ry, 5871 Glenridge Drive, Suite 400,	Atta	inta, Georgia 30327
Attached is an original particular the state of the certific Nature of busin	R mult continue of existence in a more than R e law of which it is engaged to Aphotoco the ed team to belance of the than character and ness or purposes to be conducted	opy i	ys old, duly authenticated by the official having custody of rec s not acceptable. If the certificate is in a foreign language, a
Attached is an original solution of the certific Nature of busin	R mult continue of existence in a more than R e law of which it is engaged to Aphotoco the ed team to belance of the than character and ness or purposes to be conducted	opy i	ys old, duly authenticated by the official having custody of ex s not acceptable. If the certificate is in a foreign language, a text.)
Attached is an original unider the state of the certific Nature of busin	R mult continue of existence in a more than R e law of which it is engaged to Aphotoco the ed team to belance of the than character and ness or purposes to be conducted	opy i	ys old, duly authenticated by the official having custody of ex s not acceptable. If the certificate is in a foreign language, a text.)
Attached is an original particular the state of the certific	ral certificate of existence, no more than Stellar of the translator raist be sufficient or purposes to be conducted. Signature of a member or an a	Oder por port of the property	ys old, duly sufficial to the official having custody of ex- snot acceptable. If the catificate is in a foreign language, a text.) romoted in Florida: Froperty management orized representative of a member.
Attached is an original solution of the certific Nature of busin	nal certificate of existence, no more than Stellaw of which it is organized. (A photocodule under cath of the translator must be subjected as a purposes to be conducted.) Signature of a member or an a	Ode py i briting or p	ys old, duly sufficial by the official having custody of received and acceptable. If the certificate is in a foreign language, a lext.) promoted in Florida: Froperty management orized representative of a member. the execution of this document document.

. [

ŝ

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:

nd the Florida street ac	ldress of the registered agent and o	ffice are:
•		
:		
NRAI Services, Inc.		
;	(Name)	
Florida Str	reet Address (P.O. Box NOT ACCEPTABLE	3)
;		
Weston	FL 33331	-
	City/State/Zip	-
· :		
ny at the place designat e to act in this capacity. proper and complete pe	ted in this certificate, I hereby accept. I further agree to comply with the	t the appointment as registered provisions of all statutes miliar with and accept the
	Florida Sta Weston Timed as registered agen my at the place designate to act in this capacity proper and complete pe	(Name) 2731 Executive Park Drive, Suite 4 Florida Street Address (P.O. Box NOT ACCEPTABLE Weston FL 33331 City/State/Zip amed as registered agent and to accept service of process formy at the place designated in this certificate, I hereby accept to act in this capacity. I further agree to comply with the proper and complete performance of my duties, and I am fair

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

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0581404
DATE INC/AUTH/FILED: 12/09/2005
JURISDICTION : GEORGIA
PRINT DATE : 01/18/2006
FORM NUMBER : 211

GREENBERG TRAURIG
DENISE MCSPADDEN
THE FORUM, 3290 NORTHSIDE PKWY., STE. 400
ATLANTA, GA 30327

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the apprehint date

GEORGIA LIMITED CHARLLETY CONPAN

is in compliance with the appricable filing and annual registration provisions of Title 14 of the Official Code of Coordinated

Said entity was formed in the jurisdiction Buated above or was authorized to transact business in georgia on the labove save and has not filed articles of dissolution, certificate of takeellation or any other similar document with the Office of the Setsetary of State.

This certificate related only to the legal existence of the above-named entity as of the print date above. It does not carries whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document that beet filed or is pending with the Secretary of States.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Terorical and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20060118205511005



Cathy Cox Secretary of State