

MD6000000444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

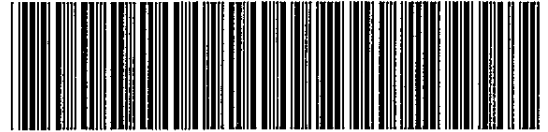
(Business Entity Name)

(Document Number)

Antified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL 32301

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MD6-444
gl

Corporate Direct, Inc.

2248 Meridian Boulevard, Suite H
Minden, Nevada 89423

775-782-2201 - Main
877-683-9343 - Main -Toll Free
775-824-0105 - FAX
775-284-7165 - Sarah Direct

January 18, 2006

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: MNL, LLC

Dear Clerk:

Please find enclosed the certificate of good standing for the above referenced company; as well as the letter we received from your office. Thank you for your attention in this matter.

If your offices should have any questions please do not hesitate to contact me at the number above.

Sincerely,



Sarah Ciccotti,
Administrative Assistant

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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:SC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2005

TINA FORD
348 MILL STREET
C/O SUTTON LAW CENTER, PC
RENO, NV 89501

SUBJECT: MNL, LLC
Ref. Number: W05000055469

We have received your document for MNL, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 405A00072418

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TAMMI CLINE
SECRETARY OF STATE

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MNL, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Tina Ford
(Name of Person)

c/o Sutton Law Center, PC
(Firm/Company)

348 Mill Street
(Address)

Reno, NV 89501
(City/State and Zip Code)

2006 JAN 25 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Tina Ford at (775) 284-7178
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 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:

1. MNL, LLC (Name of Foreign Limited Liability Company)

2. Nevada (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)

4. October 4, 2005 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")

6. N/A (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)

60 East Simpson Avenue, Jackson, WY 83001 (Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here [X]

9. The name and usual business addresses of the managing members or managers are as follows:

Lori Greymont, 60 East Simpson Avenue (PO Box 2869), Jackson, WY 83001

Michael Greymont, 60 East Simpson Avenue (PO Box 2869), Jackson, WY 83001

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: To hold and manage investments.

[Handwritten signature]

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.)

Lori Greymont

Typed or printed name of signee

2006 JAN 25 PM 3:53 SECRETARY OF STATE TALLAHASSEE FLORIDA

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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:

MNL, LLC

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

Karen Maller

(Name)

1 Progress Plaza, No. 1210

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

St. Petersburg

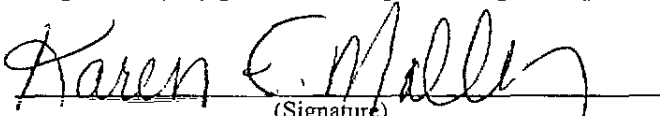
FL 33701

City/State/Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

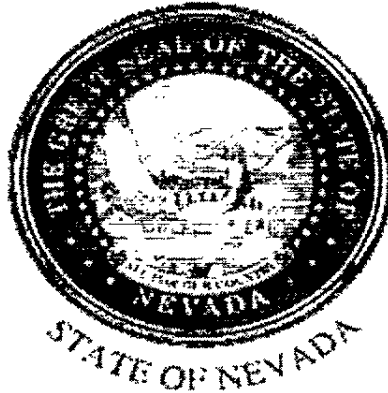
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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. 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.


(Signature)

\$ 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



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, MNL, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 4, 2005, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 13, 2006.

Handwritten signature of Dean Heller.

DEAN HELLER
Secretary of State

By

Handwritten signature of the Certification Clerk.
Certification Clerk