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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

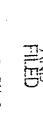
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COVER LETTER

TO: Registration Section

Division of Corporations –
SUBJECT: Birkat David 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:
Doreen Bennett
(Name of Person)
Cummings & Lockwood (Firm/Company)
3001 Tamiami Trail North #400
(Address)
Naples, Florida 34103
(City/State and Zip Code)
For further information concerning this matter, please call:
Doreen Bennett at (239) 649-3129 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations Division of Corporations Division of Corporations Clifton Publisher
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigsig \frac{1}{2}\$125.00 Filing Fee \Bigsig \Bigsig \frac{1}{2}\$130.00 Filing Fee \Bigsig \B

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:

THE PERIOR OF TH	
Birkat David LL	C
-	(Name of Foreign Limited Liability Company)
Alaska	3. 20-4000295
(Jurisdiction under the company is organized)	law of which foreign limited liability (FEI number, if applicable)
12/21/2005	5. Perpetual
(Date o	f Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
1/24/2006	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
21474 Linwoo	od Court
Boca Raton, F	Torida 33433
	(Street Address of Principal Office)
If limited liability	company is a manager-managed company, check here
The name and usu	ual business addresses of the managing members or managers are as follows:
Jonathan Agus	3
21474 Linwoo	od Court
Boca Raton,	Florida 33433
	The second secon
	I certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re
3	law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
instation of the certificat	te under oath of the translator must be submitted.)
1. Nature of busine	ess or purposes to be conducted or promoted in Florida: Investment management
Timbale of capille	25 or barbara to da damaged at browners and resident
	In 6
	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 administration under the penalties of perjury that the facts stated herein are true.)

Todd M. Beutler, Authorized Representative

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

	O DESIGNATE A REGISTERED OFFICE AND RE LORIDA.	GISTERED AGENT IN THE STATE OF
1.	The name of the Limited Liability Company is:	

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

CLASP, INC.				
	(Name)			
3001 Tamiami T	rail North, Suite 400			
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Naples	_{FL} 34103			
	City/State/Zip			

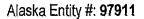
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all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

Birkat David LLC

\$ 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 Alaska Department of Commerce, Community, and Economic Development Corporations, Business and Professional Licensing

CERTIFICATE OF ORGANIZATION Limited Liability Company

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, hereby certifies that Articles of Organization duly signed and verified pursuant to the provisions of Alaska Statutes has been received in this office and have been found to conform to law.

ACCORDINGLY, the undersigned, as Commissioner of Commerce, Community and Economic Development, and by virtue of the authority vested in me by law, hereby issues this certificate to

Birkat David LLC

and attaches hereto the original copy of the Articles of Organization for such certificate.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on December 21, 2005.

Tillian Oxel

William C. Noll Commissioner