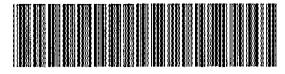
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Special Instructions to Filing Officer:



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ACCOUNT NO. : 072100000032 REFERENCE : 937640 AUTHORIZATION Linellike now COST LIMIT ORDER DATE: March 23, 2006 ORDER TIME : 1:51 PM ORDER NO. : 937640-010 CUSTOMER NO: 3112C FOREIGN FILINGS NAME: - LEGION OF DOOM LLC XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX ___ CERTIFIED COPY XX ___ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:



March 24, 2006

CORPORATION SERVICE COMPANY

R BMI

SUBJECT: LEGION OF DOOM LLC Ref. Number: W06000014171

We have received your document for LEGION OF DOOM LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

List the Registered Agents name on the certificate page.

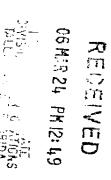
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 306A00020173





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

LEGION OF DOOR			
	(Name of Foreign Limited I	Liability Company)	
Delawar e	5		
Jurisdiction under the company is organized	e law of which foreign limited liability	(FEI number, if applicable)	
02/22/2006	:	Perpetual 5.	
(Date	of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")	-
	Date first transacted business in Flo	orida if union to marietration)	_
	(See sections 608,501 & 608,502 F.S	to determine penalty liability)	
28 NE 40th Street,		7:0	_ <u>-</u>
Miami, FL 33137			•
	(Street Address	of Principal Office)	_ :
If limited liability	y company is a manager-managed	company, check here	; [
		aging members or managers are as follows:	,
Anthony Capano, I	Maziar Soofi, Todd Litterelle, Thomas Le	enk, Jr., and Ervin Bryant- Members	
28 N. 40th Street, 1	Miami, FL 33137		_
jurisdiction under the islation of the certifica	law of which it is organized. (A photocop the under oath of the translator must be sub-	days old, duly authenticated by the official having custody of a y is not acceptable. If the certificate is in a foreign language, a mitted.) r promoted in Florida:	!
	2110	The state of the s	<u> </u>
	College 120		
	(In accordance with section 608,408(3), P	thorized representative of a member. S., the execution of this document constitutes	
	an affirmation under the penalties of perj Anthony Capano, Manager	ury that the facts stated herein are true.)	
	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 Liabilit	ty Company is:		
LEGION OF D	OOM LLC			
2. The name	and the Florida street	address of the registered agent and office are:		
	Anthony Capan	10		
		(Name)		
	28 NE 40th Street,			
	Florida S	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Miami,	FL 33137		
		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.

By Asionabure

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

'Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LEGION OF DOOM 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 TWENTY-THIRD DAY OF MARCH, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEGION OF DOOM LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2006.



Warriet Smith Hindson Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4614227

DATE: 03-23-06

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