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ACCOUNT NO. : 072100000032 REFERENCE: 990049 4320946 AUTHORIZATION COST LIMIT : ORDER DATE: April 17, 2006 ORDER TIME : 11:03 AM ORDER NO. : 990049-005 CUSTOMER NO: 4320946 FOREIGN FILINGS NAME: KIRLIN OPERATIONS, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY CONTACT PERSON: Heather Chapman -- EXT# 2908 EXAMINER: APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Kirlin Operations, LLC	
(Name of Foreign	Limited Liability Company)
Delaware	20-4502352
(Jurisdiction under the law of which foreign limited company is organized)	liability (FEI number, if applicable)
2/23/06	5. perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
Upon filing	
(Date hist transacted busing (Sec sections 608.501 & 60	ness in Florida, if prior to registration.) 8.502 F.S. to determine penalty liability)
515 Dover Road, Rockville, MD 20850	
(Street	
(,,	Address of Principal Office)
	mg =
If limited liability company is a manager-n	nanaged company, check here
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If limited liability company is a manager-n	nanaged company, check here the managing members or managers are as follows:
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Typed or printed name of signee

Robert W. Bacon, Manager

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.

Kirlin Operations, LLC		
2. The name and the Florida street add	dress of the registered agent and office are:	TO THE PROPERTY OF THE PROPERT
Corporation Service Com	pany	BE T
	(Name)	FEE
1201 Hays Street		RECT I
Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee	FL 32301	
	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: Ololo Butter

(Signature)

1. The name of the Limited Liability Company is:

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 20.00 Cartified Convey (artified)

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KIRLIN OPERATIONS, 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 SIXTH DAY OF APRIL, A.D. 2006.





AUTHENTICATION: 4648344

DATE: 04~06-06