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(Re	questor's Name)	
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SECRETARY OF STATENS
DIVISION OF CORPORATIONS
OF APR 21 PM 2: 03

S. BRYAN APR 2 5 2006

COVER LETTER

Registration Section Division of Corporations

TO:

NAVICOUROF LLO	
SUBJECT: NAVISOURCE, LLC (Name of Limit	ed Liability Company)
The enclosed "Application by Foreign Limited Liab Florida," Certificate of Existence, and check are sub liability company to transact business in Florida	ility Company for Authorization to Transact Business in mitted to register the above referenced foreign limited
Please return all correspondence concerning this ma	tter to the following:
VALARIE BUCH	and the same of th
(Nam	ne of Person)
RECORDS STORAGE	SION OF APR
(Firm	n/Company)
11208 HUTCHISON BLV	7/Company) 7/D #126 Address)
(4	Address)
PANAMA CITY, FL 3240	07-3718
(City/Stat	e and Zip Code)
For further information concerning this matter, pleas	se call:
VALARIE BUCH	850 588.0505 × 101 at (888) 233-1832
(Name of Person)	(Area Code & Daytime Telephone Number)
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum{2}\$125.00 Filing Fee \$\sum{5}\$130.00 Filing Fee & Certificate of St.}	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate tatus Certified Copy 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. NAVISOURCE, LLC (Name of Foreign Limited Liability Company) 2 DELAWARE (Jurisdiction under the law of which foreign limited liabilit (FEI number, if applicable) company is organized) 4 09-09-2005 5 PERPETUAL (Date of Organization) Duration: Year limited liability company will cease exist or "perpetual") 6. MARCH 1, 2006 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 1740H DELL RANGE BLVD, #285 CHEYENNE WY 82009-4946 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: LISA WILLINGHAM 1740H DELL RANGE BLVD #285 CHEYENNE, WY 82009-4946 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: PROCUREMENT **SERVICES** 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.)

Typed or printed name of signee

LISA WILLINGHAM

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 Con	mpany is:	
NAVISOURCE, I	LLC)6 H
2. The name ar	nd the Florida street addre	ss of the registered agent and office are:	R 21 P
	Corporation Service Compar		ST 323
		(Name)	2:04
	1201 Hays Street		. .
Florida Street 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.

Corporation Service Company

By: 1857, U.P.

(Signature)

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



PAGE 1

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NAVISOURCE, 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 FIFTEENTH DAY OF MARCH, A.D. 2006.

DIVISION OF CORPORATIONS



Darriet Smith Hindson

AUTHENTICATION: 4594032

DATE: 03-15-06

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