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2006 JUN 26 P 3: 41



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## **COVER LETTER**

**TO:** Registration Section Division of Corporations



	LORIDA
SUBJECT: AISLING ENTERPRISES, 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 refer	enced foreign limited
liability company to transact business in Florida.	

Please return all correspondence concerning this matter to the following:

JOSEPH A. TROIANO, ESC	Q
(1	Name of Person)
JOSEPH A. TROIANO, ESQ.,	PA
. <b>(I</b>	Firm/Company)
12800 UNIVERSITY DRIV	E, SUITE 380
	(Address)
FORT MYERS, FL 33907	
(City/S	State and Zip Code)
For further information concerning this matter, p	lease call:
JOSEPH A. TROIANO, ESQ.	at ( 239 ) 482-3998
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Bigsim \frac{1}{2}\$125.00 Filing Fee & Certificate of the following amount:	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

A COMPLIANCE WITH SECTION (00 502 FLORIDA)	JUN 26 D
N COMPLIANCE WITH SECTION 608.503, FLORIDA IMITED LIABILITY COMPANY TO TRANSACT BUSINESS	STATUTES, THE FULLOWING IS SUBSTIFUED TO REGISTED AFFORE.  SINTHE STATE OF FLORIDA:  ALLAS JARV
AISLING ENTERPRISES LLC	STATUTES, THE FOLLOWING IS SUBSTITUTED TO REGISTER: ALFORE SINTHE STATE OF FLORIDA:  Limited Liability Company)
(Name of Foreign I	Limited Liability Company)
ALASKA	3. 20-4419253
(Jurisdiction under the law of which foreign limited li company is organized)	iability (FEI number, if applicable)
03/02/06	5. PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
06/26/06	
(Date first transacted busine	ess in Florida, if prior to registration.) .502 F.S. to determine penalty liability)
801 W. 10TH STREET, SUITE 300	
JUNEAU, AK 99801	
(Street A	Address of Principal Office)
If limited liability company is a manager-ma	anaged company, check here
	<u> </u>
The name and usual business addresses of the	he managing members or managers are as follows:
JOSEPH A. TROIANO, MANAGER	
12800 UNIVERSITY DRIVE, SUITE 380	
FORT MYERS, FL 33907	
	than 90 days old, duly authenticated by the official having custody of records
jurisdiction under the law of which it is organized. (A proslation of the certificate under oath of the translator mus	chotocopy is not acceptable. If the certificate is in a foreign language, a
	st de subtilited.)
. Nature of business or purposes to be condu	acted or promoted in Florida:
MANAGEMENT COMPANY	
	·
KILONA	
	or an authorized representative of a member.
an affirmation under the penaltic	408(3), F.S., the execution of this document constitutes es of perjury that the facts stated herein are true.)
JOSEPH A. TROIANO,	, MANAGER

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF TOOL JUN 26 P 3 41.

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES OF UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

l. Th	e name o	f the l	Limited	Liability	Company	y is:
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# AISLING ENTERPRISES, LLC

2.	The name and the	Florida street	address of	of the	registered	agent	and	office are	Э:
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JOSEPH A. TROIANO	, ESQ.
	(Name)
12800 UNIVERSITY	DRIVE, SUITE 380
Florida Street Ad	dress (P.O. Box <u>NOT</u> ACCEPTABLE)
FORT MYERS,	<sub>FL</sub> 33907
	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.

(Signature)

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

Alaska Entity # 99473

State of Alaska

Department of Commerce, Community, and Ecottomic

Development

Development

# CERTIFICATE OF GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

### AISLING ENTERPRISES, LLC

on the 2nd day of March, 2006 filed in this office its Articles of Organization for a Limited Liability Company organized under the laws of this state.

I FURTHER CERTIFY that said Limited Liability Company is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 2nd day of March, 2006.

Julian Once

William C. Noll Commissioner

Certification Number: 108888-1

Verify this certificate online at https://myalaska.state.ak.us/business/soskb/verify.asp