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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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)6 JUL 13 PM I2: 07 ECRETARY OF STATE ALLAHASSEF ELORIO.

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LON DATA SOLUTIONS 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:
PHILIP LEFKOFF (Name of Person)
(Name of Person)
(Firm/Company)
(Firm/Company)
3033 MAPLE DRIVE
3033 MAPLE DRIVE (Address)
ARANTA GEOLGIA 30305 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
MILIP LEFTOFF at (494) 240 - 1373 (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
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 \text{ Filing Fee}\$ \$\Bigsim \frac{1}{2}\$130.00 \text{ Filing Fee & Bigsim Status}\$ \$\Bigsim \frac{1}{2}\$155.00 \text{ Filing Fee & Bigsim Status}\$ \$\Bigsim \frac{1}{2}\$160.00 \text{ Filing Fee, Certificate of Status}\$ \$\Bigsim \frac{1}{2}

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 RUSINESS IN THE STATE OF FLORIDA:

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··-			O DATA (Name	e of Foreign L	imited Lial	oility Comp	pany)		,		
2. (Juriso compa	Géo diction un any is org		w of which for					- <i>368</i> number, if	156	o le)	
4	<u> </u>	Date of C	ganization)	006	5.	(Duration exist or "	n: Year lin perpetual	nited liabi ')	lity comp	any will co	ease to
6		Janu	(See sections 60	006 nsacted busine 08.501 & 608.	ess in Floric	la, if prior	to registra	tion.)		EUR HAS	۲۱ <u>۱ الل</u> 13 عالل
7			3 MAR ZANTA	_)5				EE FLO	PH 12:
	name a	ibility co	ompany is a	manager-ma	anaged co	ompany, o	check he	re 🗹	are as t	follows:	
	11911	u.	S. HIGHL	AY ONG		Suite	207				
	North		beach								
the jurisd translatio	liction und n of the c	ler the law ertificate u	ertificate of exist v of which it is o under oath of the	rganized. (A p translator mus	hotocopy is t be submitt	not accepta ed.)	able. If the	certificate	is in a fo	reign langu	iage, a
	ND	DATA	STORAGE). 2						,
		(Signature of a coordance with an affirmation ur	ith section 608. Inder the penaltic	408(3), F.S., es of perjury	the execution that the fact	on of this d ts stated he	ocument co	nstitutes		
		_		Typed or	printed na	ame of sig	gnee		. —		

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.

	IRON DAT	4 SOLUTIONS	LLC	
. The na	me and the Flor	rida street address o	of the registered agent and office are:	
•		Charlie	Perez = = = = =	
		Char he	(Name) ALL	=
		11911 4.5.	HIGHUAY ONC SUITE 307 公司 T	. 5
		Florida Street Addre	ress (P.O. Box NOT ACCEPTABLE)	D M
		North Palm BEA	MA FL 33408 SE	TO :CI MG
	·	,	City/State/Zip	-1

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)

Control No. 0571579

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

IRON DATA SOLUTIONS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 10/20/2005 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 28th day of June, 2006

Cathy Cox Secretary of State

Certification Number: 155260-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp