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November 16, 2006

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

CrossCom National LLC

CrossCom National LLC				
Filing Evidence ☑ Plain/Confirmation Copy	Type of Document Company Certificate of Status Company Certificate of Good Standing E			
□ Certified Copy	□ Certificate of Good Standing 📆			
	□ Articles Only			
	□ All Charter Documents to Include			
Retrieval Request	Articles & Amendments			
□ Photocopy	□ Fictitious Name Certificate			
□ Certified Copy	□ Other			
NEW FILINGS	AMENDMENTS			
Profit	Amendment			
Non Profit	Resignation of RA Officer/Director			
Limited Liability	Change of Registered Agent			
Domestication	Dissolution/Withdrawal			
Other	Merger			
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OTHER FILINGS	REGISTRATION/QUALIFICATION			
Annual Reports	Foreign			
Fictitious Name X	Limited Liability			
Name Reservation	Reinstatement			
Reinstatement	Trademark			
	Other			

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

	\$5 6 m
Li	ability Company)
3	20-1721299
,	(FEI number, if applicable)
5.	Perpetual (Duration: Year limited liability company will cease to.
	exist or "perpetual")
	· y
Flor S t	ida, if prior to registration.) o determine penalty liability)
SS O	f Principal Office)
	ging members or managers are as follows:
	ome memoris of managers are as forews.
	-
ch i	an 90 days old, duly authenticated by the official having t is organized. (A photocopy is not acceptable If the certified oath of the translator must be submitted)
or l	promoted in Florida: installation and maintenance of
, . ·	
, FS	norized representative of a member the the execution of this document constitutes y that the facts stated herein are true)
	ings, LLC
	Soluth F Sajur

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 Liability Company is:
CrossCom Nationa	il, LLC
2. The name an	nd the Florida street address of the registered agent and office are:
	NRAI Services Inc.
	(Name)
	2731 Executive Park Drive, Suite 4
	Florida Street Address (P O Box NOT ACCEPTABLE)
	Weston, Florida 33331
	City/State/Zip
liability company agent and agree relating to the pr	ned as registered agent and to accept service of process for the above stated limited y at the place designated in this certificate, I hereby accept the appointment as registed to act in this capacity. I further agree to comply with the provisions of all statutes open and complete performance of my duties, and I am familiar with and accept the position as registered agent as provided for in Chapter 608, Florida Statutes NRAI Services, Inc.
By: ////CAD	(Signature)

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

\$ 25.00 Designation of Registered Agent

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CROSSCOM NATIONAL, 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CROSSCOM NATIONAL, LLC" WAS FORMED ON THE SEVENTH DAY OF OCTOBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Warriet Smith Windows Serveton of State

AUTHENTICATION: 5202079

DATE: 11-16-06

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