Florida Department of State Division of Corporations Public Access System

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Mobile Ice Products and Services LLC

Certificate of Status	0
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Corporate Filing Menu

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TRANSACT BUSINESS IN FLORIDA

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No	t applicable						
	(Date first transacted by (See acctions 608.501 &	niness in Florida, 506.502 F.S. to de	of prior to registration describe peculty liabi	ı) lity)	-		
c/	o RIFENBURG CON	STRUCTION	INC.				
	159 BRICK CHU	RCH ROAD,	TROY, NEW 1	ORK 12180			
	(Str	eet Address of Pri	incipal Office)			• •	
limited liabili	ity company is a manager	-managed com	pany, check here	X			
he name and r	usual business addresses o	of the manacine	è membera or mai	agers are as follows	9:		
	•		•	*			
GEORGE A.	RIPENBURG, 159	Brick Chi	irch Road, 1	roy, New Yor	k 12180		
John K. F	RIFENBURG, 159 B	rick Churc	sh Road, Tro	v. New York	12180		•
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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.	1. The name of the Limited Liability Company is:							
_	MOBILE	ICE PRODUCT	AND	SERVICES	LLC			
2.	The name an	d the Florida street	address	of the register	ed agent and	office are:		
			c	T Corporation Sy	riem.		-	
				(Name)				н
•			1200	South Pine Islan	d Road		_	
Florida Street Address (P.O. Hox NUT ACCEPTABLE)						LA)	-	*;
	•	·,	Pla	ntation, Florida 3	3324		_	
			ï	City/State/2	ip	•	•	

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) STEVEN P. ZRIZMER

SPECIAL ASSISTANT SECRETARY

\$ 100.00 Filing Fee fer Application

Designation of Registered Agent 25,00

30.00 Certified Copy (optional)

Certificate of Status (optional) 5.00



DA/20 1

The First State

I, HARRIET SMITE WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MOBILE ICE PRODUCTS AND SERVICES 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 FOURTEENTH DAY OF DECEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4196958 8300 061148413 Daniel Smith Hindson Scornery of State

ADTHENTICATION: 5281305

DATE: 12-14-06

DIVISION OF CORPORATIONS

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