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PICK-UP WAIT MAIL	
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Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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City/State/Zip Phone #	5454	Office Use Only	13 M 13 8
CORPORATION NAME(\$) & DOCUM	ENT NUMBER(S), (if k		360
1. Collins Eighth	LLC		Y
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2. (Corporation Name)	(Document #)		
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4. (Corporation Name)	(Document #)		
Walk in Pick up time		Certified Copy	
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NEW FILINGS	AMENDMENTS		
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger	ed Agent	
OTHER FILINGS	REGISTRATION/QUA	ALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other		.j
CR2E031(7/97)		Examiner's Initials	

13-2007 FRI 10:43 AM	FAX NO.	P. 02/04
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		350 4
APPLICATION BY FOREIGN LIMITED 1 TRANSACT 1	LIABILITY COMPANY FOR AUTHO. BUSINESS IN FLORIDA	ILIZATION TO
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STA LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN		IBGISTER A ROPEIGN &
1. Collins/Eighth LLC		
(Name of Foreign Limited Liability Company; must	include "Limited Liability Company," "L.L.C.," o	r "LLC.")
(If name unzvailable, enter alternate name adopted for the propert of the managers or managing members adopting the Company," "L.L.C.," "LLC.")		
Delaware	3 98-0508183	
(Jurisdiction under the law of which foreign limited liable company is organized)	lity (FEI number, if applicable)	
4, 06/23/2006	5. perpetual	
(Date of Organization)	(Duration: Year limited liability company exist or "perpetual")	y will cease to
5. /Pula fiver transported historians	in Blorida (Carlor to capitation)	
•	in Florida, if prior to registration.) 2 F.S. to determine penalty liability)	
2300 Rue Emile Belanger, Ville	St. Laurent, Quebec, Canada	H4R 3JR
(Street Add	dress of Principal Office)	
8. If limited liability company is a manager-mana	aged company, check here	
9. The name and usual business addresses of the	managing members or managers are as fol	lows:
Davaldou US, Inc., a Delaware		
2300 Rue Emile Belanger, Ville		H4R.3JR
10. Attached is an original certificate of existence, no more that he jurisdiction under the law of which it is organized. (A phot ranslation of the certificate under outh of the translator must be	occopy is not acceptable. If the certificate is in a foreign submitted.)	දිට අගතිනේද ස
11. Nature of business or purposes to be conducted	ed or promoted in Florida: any lawful ac	ct or activities.
Ag		·
	n authorized representative of a member. (3), F.S., the execution of this document constitutes	•
an affirmation under the penalties of	f porjury that the facus stated herein are true.)	,
	u US, Inq., a DS corporation, Managing Marriber of CollinatEighth LLC	
Typed or pri	nted name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

A STATUTES, THE

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.

ghth LLC			
If name unavailable, the alternate name to be used in the state of Florida is:			
and the Florida street address of the registered agent and office are:			
Corporation Company of Miami			
(Name)			
201 S. Biscayne Blvd., Suite 1500 (MAR) Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Miami, FL 33131 FL 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 698, Florida Statutes.

ignature

Asst. Secretary of CCOM

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

DAGE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "COLLINS/BIGHTH LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE TWENTY-THIRD DAY OF JUNE, A.D. 2006, AT 3:16 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "COLLINS/EIGHTH LLC".

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

4180355 8310 070796621



Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 5827823

DATE: 07-10-07