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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Support C (Name of Limit	ited Liability Company)
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited
Please return all correspondence concerning this m	atter to the following:
	frey Ball me of Person)
Su	fort Consulting, UC m/Company)
30	Caprico Ct (Address)
Love	land OH 45/40 ate and Zip Code)
(City/Sta	ate and Zip Code)
For further information concerning this matter, plea	ase call:
Jeffrey Ball	at (5/3) 697-65/9 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigsiz\$ \$\\$125.00\$ Filing Fee \$\Bigsiz\$ \$\Bigsiz\$ \$\\$Certificate of \$\Bigsiz\$	□\$155.00 Filing Fee & ☑\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 31, 2007

JEFFREY BALL 311 CAPRICE COURT LOVELAND, OH 45140

SUBJECT: SUPPORT CONSULTING, LLC

Ref. Number: W07000036967

We have received your document for SUPPORT CONSULTING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent ofthe managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Document Specialist

Division of Comparations DO DOV 6297 Tellaharan Elevida 20214

Letter Number: 707A00047462

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: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.U.C.") Consulting, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") (Jurisdiction under the law of which foreign limited liability 3. (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 311 Caprice Ct. Love and, off 45/40
(Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Jeffrey Ball, 311 Caprice Ct., Loveland, Ott 45140 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a 11. Nature of business or purposes to be conducted or promoted in Florida: <u>Government consulter</u> (see original application) translation of the certificate under oath of the translator must be submitted.) a phember or an authorized representative of a member. Signature of (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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:	
Support Consulting, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Eunice Gallets	
(Name)	
2825 SW 22nd Ave. Ste. 105 Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Delray Beach FL 33445 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.

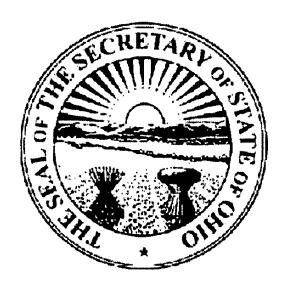
Einice Galleto
(Signature)

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

2007 AUG 17 PH 2: 3

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SUPPORT CONSULTING, LLC, an Ohio Limited Liability Company, Registration Number 1687954, was organized within the State of Ohio on April 01, 2007, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 20th day of July, A.D. 2007

Ohio Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Validation Number: V2007201JC336E

WRITTEN CONSENT OF THE MANAGER OF SUPPORT CONSULTING, LLC

1, Jeffrey Ball, the only member of Support Consulting, LLC, registered in Ohio effective April 1, 2007, hereby agrees that as of August 10, 2007 I consent to the use of the name Ball Consulting, LLC for registration to conduct business in the State of Florida. There are no other members so this consent constitutes the consent of the company.

Jeffyey Ball, Owner/Sole Member

Date

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SECRETARY OF STATE
TALLAHASSEF, FLORIDA