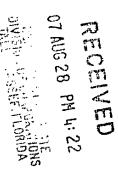
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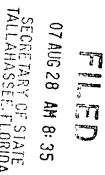
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400106972054







ACCOUNT NO. : 072100000032

REFERENCE : 178697

4308537

AUTHORIZATION

man

COST LIMIT : \$ 125.00

ORDER DATE: August 28, 2007

ORDER TIME : 2:55 PM

ORDER NO. : 118697-005

CUSTOMER NO: 4308537

FOREIGN FILINGS

NAME: AFP, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER:

•	
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA	
N COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A POREIGN IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
· AFP, LLC	· K
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	! بحر
AFP Fire Protection, LLC If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written.	5
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")	
Georgia 3. 26-0611544	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
7/12/07 5. Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
• •	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
3017 Vernon Road, Suite 100	
·	
Richmond, VA 23228 (Street Address of Principal Office)	
(Street Address of Frincipal Office)	
. If limited liability company is a manager-managed company, check here	
The name and usual business addresses of the managing members or managers are as follows:	
East Coast Fire Protection, Inc. (sole member)	
3017 Vernon Road, Richmond, VA 23228	
0. 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 ranslation of the certificate under eath of the translator must be submitted.)	
1. Nature of business or purposes to be conducted or promoted in Florida: Installation,	
inspection and maintenance of fire protection systems	
x The cw	
Signature of a member or an authorized representative of a member. (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.) Thomas York, CFO of East Coast Fire Protection, Inc., Sole Member	

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.

If name unavaila	ble, the alternate name to be used in the state of Florida is:
AFP Fire Prot	ection, LLC
2. The name and	the Florida street address of the registered agent and office are:
	Corporation Service Company
•	(Name)
	1201 Hays Street
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
•	

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.

Corporation Service Company

BY: While Buck I (Signature)

Kimberty B. Moret as its agent

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

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of AFP, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
Georgia
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
AFP Fire Protection, LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: August 27, 2007
Signature(s) of Manager(s) and/or Managing Member(s):
East Coast Fire Protection, Inc., Sole Member
By: X - 15 CW
Thomas York, CFO
· · · · · · · · · · · · · · · · · · ·

Control No. 07057619

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, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

AFP, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 07/12/2007 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 August, 2007

Karen C Handel Secretary of State

Kaun C. Handel

Certification Number: 1608003-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp