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SECRETARY OF STATE

August 31, 2007 Dear Sir Madam we get this processed immediately, We would appreciate your Issistance in handling and returning by Federal Express in the enclosed envelope (pre paid). Thank you. Jitz Gerald Address Traggette Mase cull on In.
Sent.
Thurs 888 186 2690

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: FitzGerald Addison Group L	LC			
	ted Liability Company)			
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited			
Please return all correspondence concerning this ma	atter to the following:			
Abbott S. Estrin				
(Nar	ne of Person)			
FitzGerald Addison Group	LLC			
(Firm/Company)				
20000 East Country Club D	Prive # 312			
(Address)				
Aventura, Florida 33180				
(City/Sta	te and Zip Code)			
For further information concerning this matter, plea	se call:			
Abbott S. Estrin	at (786) 888-2690			
(Name of Person)	(Area Code & Daytime Telephone Number)			
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\Bigsim \mathbf{\$\frac{1}{2}\$.00 Filing Fee & Certificate of \$\frac{1}{2}\$.	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy			

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:

1. FitzGerald Addison Group LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. South Carolina (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. July 30, 2001 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 20000 East Country Club Drive, # 312
Aventura, Florida 33180
(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: Abbett S. Estrip 20000 Foot Country Club Drive # 212, Aventure, El. 22190
Abbott S. Estrin, 20000 East Country Club Drive # 312, Aventura, FL 33180 Deborah Estrin, 20000 East Country Club Drive # 312, Aventura, FL 33180
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 translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Executive search/recruiting
Signature of a member or an authorized representative of a member. (In accordance with action 608.408(3), F.S. the execution of this document constitutes an affirmation under the penalties of periory that the facts stated herein are true.)
Abbott S. Estrin 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 Limit	ted Liability Company	y is:	
FitzGerald Addiso	n Group LLC		<u>. </u>
If name unavailable, the	alternate name to be u	sed in the state of Florida is:	
2. The name and the Flo	rida street address of t	the registered agent and office are:	
Abbot	t S. Estrin		五名
		(Name)	
20000	East Country C	lub Drive, # 312	ASSE
	Florida Street Address	s (P.O. Box NOT ACCEPTABLE)	TO TO
Aventura,	FL 33180	FL City/State/Zip	ORIDA
liability company at the p agent and agree to act in relating to the proper and obligations of my position	lace designated in this this capaeity. I further l complete performance vas registered agent as \$100.00 \$25.00 \$30.00	accept service of process for the above certificate, I hereby accept the appoint agree to comply with the provisions of of my duties, and I am familiar with a provided for in Chapter 608, Florida provided for Graphication of Registered Agent Certified Copy (optional)	ntment as registered of all statutes and accept the

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

FITZGERALD ADDISON GROUP, L.L.C., A Limited Liability Company duly organized under the laws of the State of South Carolina on August 6th, 2001, with a duration that is until December 31st, 2025, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 30th day of August, 2007.

Mark Hammond, Secretary of State