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FILED SECRETARY OF STATE BIVISION OF CORPORATIONS

J. BRYAN

MAR 2 1 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:	IPT HOL		Liability Company)		
Florida," Cert	"Application by Foreign L ificate of Existence, and cl any to transact business in	imited Liabilit	y Company for Author		
Please return	all correspondence concern	ning this matte	r to the following:		
	JOHN PAVI	A			
			of Person)		•
	I PT, LLC				0 8
		(Firm/C	Company)		8 MA
	10 Columbu	s BLUD			OB MAR 20 PH 3: 46
		(Ad	dress)	•	PH (
	HART FORD,	CT	06106		ATTENS 3: 46
		(City/State a	and Zip Code)		
For further in	formation concerning this	matter, please	call:		
70	HH PAVIA		t (<u>860)</u> <u>466 (Area Code & Daytii</u>	7428	-
	(Name of Person)		•	ne Telephone Numi	er)
Divisio P.O. B	ING ADDRESS: on of Corporations ox 6327 assee, FL 32314	Di Cl 26	REET ADDRESS: vision of Corporation ifton Building 61 Executive Center (llahassee, FL 32301		
	check for the following am .00 Filing Fee \$\infty\$\$130.00 F	nount: iling Fee & certificate of Statu		\$160.00 Filing Fce, of Status &	Certificate 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: TPT HOLDINGS, 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 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 (FEI number, if applicable) company is organized) 4. 3. 12. 08 (Date of Organization) 3.19.08 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 9724 W. SAMPLE ROAD 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: AMES R. BARNES, MEMBER, 10 Cohembus Blue. HARTFORD, CT 06106 LOBERT Cole, MANAGER, 9724 W. SAMPLE ROAD, COTAL SPRINGS, FL 33065 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: FACILITIES MAINTENANCE 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.)

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.

	f the Limited Liability Company is: HOLDINGS, LLC.		
If name unavai	lable, the alternate name to be used in the stat	e of Florida is:	
2. The name a	md the Florida street address of the registered	agent and office are:	
	(Name)		AH 80
	9724 W. SAmile ROAD		PIL NVISION OF C
	Florida Street Address (P.O. Box NO	T ACCEPTABLE)	O J W
	CORAL SPRINGS, FL City/State/Zip	33065	OF STATE RPORATIONS

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)

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

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

IPT HOLDINGS, LLC

a domestic limited liability company, were filed in this office on March 11, 2008.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: March 14, 2008

Business ID: 0930966 Standard

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov

Certificate Number: 2008064329001