18000003126

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000163993 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

Fax Number

: (850)878-5926

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Deep Services, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Ming MehriPTON

Help

JUL - 2 2008

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.513, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA-Deep Services, 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.") 3, _98-0500197 Wisconsin Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized) 6/26/06 Pernetual (Duration: Year limited liability company will ocuse to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) ROUTE DE VUARAT REMAUFENS, 1617 Switzerland, Swiss Confederation (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: 98 Ø Jean-Luc Trachsel 25 West Main Street, Madison, Wisconsin 53703 Josiane Traches! 25 West Main Street, Madison, Wisconsin 53703 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official buying 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 onth of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Wholesale and retail trade 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 au affirmation under the penalties of purjury that the facts stated herein are true.)

JEAN-LUC TRACHSEL

PLOST - OFFICE OUT CITY System Only

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 unavai	lable, the afternate name to b	e used in the state	of Florida is:	
2. The name as	nd the Florida street address	of the registered ag	ent and office are:	
	c t	Corporation System		
•		(Name)		
	. 1200 8	louth Pine Island Road		
	Plorida Street Add	OM (P.O. BOX NOT A	CCEPTABLE)	
	Plantation	FI.	33324	
		City/State/Zip		
liability compan agent and agree relating to the pr	med as registered agent and to y at the place designated in the to act in this capacity. I furth coper and complete performan y position as registered agent CT Corporation System	is certificate, I here er agree to comply uce of my dutics, and as provided for in C Jill Duff	by accept the appoinmen with the provisions of all I am familiar with and i	nt as registered statutes accept the

\$ 100.00 Filing Fee for Application

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

\$ 25.00

\$ 30.00

5.00

71.057 - 06/28/2007 C T Symma Outer

OB JUL -1 "8:22 SECRETARY OF STATE SECRETARY OF STATE

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

DEEP SERVICES, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is June 26, 2006.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on July 1, 2008.

RAY ALLEN, Deputy Administrator
Division Of Corporate & Consumer Services
Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfl.org/apps/ccs/verify/

Enter this code:

55602-0338BBAB