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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353 Phone : (212)431-5000

Fax Number : (212)431-5000 Fax Number : (212)431-1441

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MONTEGO ACQUISITIONS LLC

RECEIVED AUG 12 AM 11: 56 GREGARION SAME LAHASSER, PLORIDA

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J. BRYAN

AUG 1 3 2008

EXAMINER

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

IN COMPLIANCE WITH SECTION 608.503, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECESTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. MONTEGO ACQUISITIONS LLC	
(Name of F	orcign Limited Liability Company)
DELAWARE (Jurisdiction under the law of which foreign I company is organized)	Imited liability (FEI number, if applicable)
JUNE 18, 2008 (Date of Organization)	(Duration: Year imuted liability company will cease to exist or "perpetual")
(Date first transacte (Sec sections 608.50)	d business in Florids, if prior to registration.) & 608.502 F.S. to determine penalty liability)
9 DAMONMILL SQUARE, SUITE 1A, CO	NCORD, MA 01742
. If limited liability company is a mans	(Street Address of Principal Office) ager-managed company, check here
	ics of the managing members or managers are as follows:
	no more than 90 days old, duty authenticated by the official having custody of records and (A photocopy is not acceptable. If the certificate is in a foreign language, a stor must be submitted.)
	conducted or promoted in Florida: SALES AND LEASING OF
	mber or an authorized representative of a member.
an affirmation under th	tion 608.408(1), F.S., the execution of this document constitutes a possities of porjury that the facts stated herein are true.) N, PREIDENT OF TVPX ACQUISITIONS INC. MANAGING 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.

I. The name of t	ne Limited Liability Company is:	
MONTEGO ACQL	IISITIONS LLC	<u> </u>
2. The name and	the Florida street address of the registered agent and office are:	08 AUG 12
	BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.	2
•	(Namo)	霊
	4435 OLD WINTER GARDEN RD	် <u>ဗှ</u> သ
-	Florida Street Address (P.O. Box NOT ACCEPTABLE)	٥
9	ORLANDO, FL 32811 FL City/State/Zip	
liability company agent and agree	ned as registered agent and to accept service of process for the above sto at the place designated in this certificate, I hereby accept the appointm to act in this capacity. I further agree to comply with the provisions of a oper and complete performance of my duttes, and I am familiar with and	ent as registered Il statutes
obligations of my	position as registered agent as provided for in Chapter 608, Florida St	atutes.
work	MARC MOEL, ASSISTANT SECRETARY	
	(Signature)	

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

Fax:888-692-9256



I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MONTEGO ACQUISITIONS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE BROW, AS OF THE NINETEENTH DAY OF JUNE, A.D. 2008.

080703233

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6671345

DATE: 06-19-08