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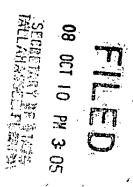
(Requestor's Name)				
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. PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: Size 10th Date				

Office Use Only



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October 3, 2008

TODD MEREDITH 6150 METROWEST BLVD SUITE 305 ORLANDO, FL 32835

SUBJECT: DCT INTERNATIONAL LLC

Ref. Number: W08000045814

We have received your document for DCT INTERNATIONAL LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 708A00052591

SCHELLER & LEE, P.L.C.

ATTORNEYS AT LAW

TELEPHONE: (407) 792-1285 FACSIMILE: (407) 513-4146 E-MAIL: RLEE@FLUSALAW.COM

MAILING ADDRESS: Post Office Box 3309 Orlando, Florida 32802-3309 COURIER ADDRESS: 1000 Legion Place, Suite 1518 Orlando, Florida 32801

October 09, 2008

VIA FEDERAL EXPRESS: 8665 4539 0983

Division of Corporations ATTN: Suzanne Hawkes 2661 Executive Center Circle Clifton Building Tallahassee, Florida 32314

Re:

DCT International, LLC

Ref. Number: W08000045814

Dear Ms. Hawkes:

Pursuant to instructions received from Florida's Division of Corporations, please find enclosed the Certificate of Designation of Registered Agent/Registered Office, and a copy of the letter dated October 3, 2008. Additionally, your office informed me there are no other fees due. Thank you.

If you have any questions, please do not hesitate to contact me at (407) 792-1285.

Very truly yours,

Courtney E. Dille

Enc

COVER LETTER

TO: Registration Sec Division of Corp		
SUBJECT: DCT Int		ted Liability Company)
Florida," Certificate of I		pility Company for Authorization to Transact Business in pmitted to register the above referenced foreign limited
Please return all corresp	ondence concerning this ma	atter to the following:
Todd M	leredith	·
	(Nan	ne of Person)
DCT In	ternational LLC	ALLIAN SO
	(Firn	n/Company)
6150 M	etrowest Blvd., Suite	
	(Address)
Orlando	o, FL 32835	% %
	(City/Sta	te and Zip Code)
For further information	concerning this matter, plea	se call:
Todd Mered	th	_ at (407) 351-9129
1)	Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADI	RESS:	STREET ADDRESS:
Division of Corp		Division of Corporations
P.O. Box 6327		Clifton Building
Tallahassee, FL	32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for t \$125.00 Filing For		\$155.00 Filing Fee & \$\subset\$

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

DCT International LLC ,				
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")			
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the alternate Company," "L.L.C.," "LLC.")	of transacting business in Florida and attach a copy of the written ate name. The alternate name must include "Limited Liability			
2 Nevada 3	76-0828369			
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)			
4. May 8, 2006 5.				
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")			
6. 11/1/08				
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)			
7 6150 Metrowest Blvd., Suite 305				
Orlando, FL 32835				
(Street Address of	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
8. If limited liability company is a manager-managed co				
9. The name and usual business addresses of the manag	ging members or managers are as follows: S			
6150 Metrowest Blvd., Suite 305				
Orlando, FL 32835				
	,			
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submit	s not acceptable. If the certificate is in a foreign language, a			
11. Nature of business or purposes to be conducted or p	promoted in Florida: Retail of Clothing & Accessories			
Signature of a member or an auth (Inaccordance with section 608.408(3), F.S. an affirmation under the penalties of perjury Todd Meredith				

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 Limited Liability Company is:

DCT International LLC	玩的	8	Carried .
If name unavailable, the alternate name to be used in the state of Florida is:	CAT	S	COLUMN TO
Hollywood Obsessions		0	
2. The name and the Florida street address of the registered agent and office are:	11 15 15 15 15 15 15 15 15 15 15 15 15 1	P. 43	
	minic of the	* Q	

SCHELLER & LEE, P.L.C.

(Name)

1000 Legion Place Suite 15/8

Florida Street Address (P.O. Box NOT ACCEPTABLE)

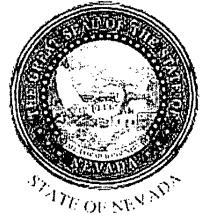
ORLANDO FL 32801

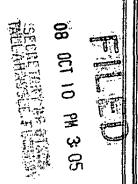
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

ture

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

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **DCT INTERNATIONAL**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 8, 2006, and is in good standing in this state.

office on October 1, 2008.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20081001-1127
You may verify this electronic certificate
online at http://www.nvsos.gov/