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(1	Requestor's Name)	
(,	Address)	
(Address)		
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((City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(I	Business Entity Name)	
	Document Number)	
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S. HAWKES NOV 5 2008 EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: Dukee, LLC	to de l'illian Command
(Name of Limi	ted Liability Company)
The enclosed "Application by Foreign Limited Liab Florida," Certificate of Existence, and check are sulliability company to transact business in Florida	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:
Bridget M. Mann, CP	
(Nar	ne of Person)
Nason Yeager Gerson	White & Lioce PA
(Fin	n/Company)
1645 Palm Beach Lake	s Blvd., Suite 1200
	(Address)
West Palm Beach, FL 3	33401
	te and Zip Code)
For further information concerning this matter, plea	se call:
Bridget	_at (561) 471-3514
(Name of Person)	(Area Code & Daytime Telephone Number)
, , ,	
MAILING ADDRESS: STREET ADDRESS:	
Division of Corporations Division of Corporations Division of Corporations	
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	Tallahassee, FL 32301
	1 41141145500, 1 D 52501
Enclosed is a check for the following amount: \$\sum_\$125.00 \text{ Filing Fee} \text{\$\sum_\$130.00 \text{ Filing Fee & Certificate of }}\$	\$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 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN	
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1 Dukee, 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.")	E. C.
2. Nevada 3.	
(Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized)	
4. 4/17/08 5. perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. 10/30/08	
(Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)	
7. 1014 Commercial Ave.	ļ
West Palm Beach, FL 33404 (Street Address of Principal Office)	
(Street Address of Finisher 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:	
Benno Janssen III	ļ
1014 Commercial Ave.	
West Palm Beach, FL 33404	
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: Real Estate	
v ((A)	
Signature of a member or an authorized representative of a member.	
(In accordance with acction 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.) Benno Janssen III	
Politic owners in	1

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:
Dukee, LLC
If name unavailable, the alternate name to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Benno Janssen III
(Name)
1014 Commercial Ave.
Florida Street Address (P.O. Box NOT ACCEPTABLE)
West Palm Beach FL
Clty/State/Zip

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

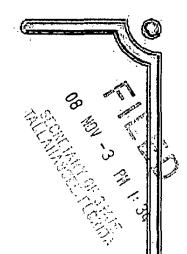
\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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, **DUKEE**, **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 April 17, 2008, and is in good standing in this state.

OF THE CONTRACT OF THE CONTRAC

ROSS MILLER

office on October 30, 2008.

ROSS MILLER Secretary of State

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

Electronic Certificate
Certificate Number: C20081030-0895
You may verify this electronic certificate
online at http://www.nvsos.gov/