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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Assured Source Corpo	rate, LLC				
	of Limited Liability Company)				
	ed Liability Company for Authorization to Transact Business in are submitted to register the above referenced foreign limited rida				
Please return all correspondence concerning	this matter to the following:				
Stephen J. Beresh	· · · · · · · · · · · · · · · · · · ·				
	(Name of Person)				
Assured Source Corpo	orate, LLC				
(Firm/Company)					
50 West Big Beaver, S	Suite 245				
	(Address)				
Troy, MI 48084					
(C	City/State and Zip Code)				
For further information concerning this matter	er, please call:				
Stephen J. Beresh	_{at (} 248) 7864530				
(Name of Person)	(Area Code & Daytime Telephone Number)				
MAILING ADDRESS:	STREET ADDRESS:				
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount \$\sum_{125.00}\$ \text{Filing Fee} \sum_{130.00}\$ \text{Filing I} Certifi	t: Fee & \$\sum_\$155.00 Filing Fee & \$\sum_\$\$160.00 Filing Fee, Certificate cate of Status				



November 18, 2008

STEPHEN J. BERESH 50 WEST BIG BEAVER SUITE 245 TROY, MI 48084

SUBJECT: ASSURED SOURCE CORPORATE, LLC

Ref. Number: W08000052290

We have received your document for ASSURED SOURCE CORPORATE, 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 LLC cannot be its own Managing Member designate an individual or another business entity.

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) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 408A00057577

APPLICATION BY FOKEIGN 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 HARD TYCOMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

1. Assured Source Corporate, LLC (Name of Foreign Limited Liability Company; must i	includ	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the pu consent of the managers or managing members adopting the Company," "L.L.C.," "LLC.")	urpose alterr	e of transacting business in Florida and attach a copy of the writter nate name. The alternate name must include "Limited Liability
_{2.} Michigan		83-0501974
(Jurisdiction under the law of which foreign limited liabili company is organized)	ity	(!EI number, if applicable)
4. 12/26/2008	5.	Perpetual
(Date of Organization)		(Duration: Year limited liability company will cease to
6. 12/31/2008		Eg a **
(Date first transacted business ir (See sections 608.501 & 608,502	n Flor F.S. t	ida, if prior to registration.) o determine penalty liability)
7. 50 West Big Beaver, Suite 245		
Troy, MI 48084		<u>ස</u> ු ද ද ද ද
· · · · · · · · · · · · · · · · · · ·	ress of	f Principal Office)
8. If limited liability company is a manager-manager	ged c	ompany, check here
9. The name and usual business addresses of the n	nanac	ging members or managers are as follows:
WILLIAM F. STACKER	,,,,,,,,,	and members of managers are as follows.
50 West Big Beaver, Suite 245		
Troy, MI 48084		
	$\Delta \Delta A_{-1}$	
10. Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A photo translation of the certificate under oath of the translator must be s	сору	is not acceptable. If the certificate is in a foreign language, a
the jurisdiction under the law of which it is organized. (A photo translation of the certificate under oath of the translator must be s	copy i submi	is not acceptable. If the certificate is in a foreign language, a itted.)
the jurisdiction under the law of which it is organized. (A photo translation of the certificate under oath of the translator must be s	copy i submi	is not acceptable. If the certificate is in a foreign language, a itted.)
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the jurisdiction under the law of which it is organized. (A photo translation of the certificate under oath of the translator must be s	copy i submi	is not acceptable. If the certificate is in a foreign language, a itted.)
the jurisdiction under the law of which it is organized. (A photo translation of the certificate under oath of the translator must be set 11. Nature of business or purposes to be conducted. Signature of a member or an	copy submi d or p	is not acceptable. If the certificate is in a foreign language, a itted.)

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 o	f the Limited Liability Comp	any is:	
Assured Source	Corporate, LLC		
If name unavai	lable, the alternate name to b	e used in the state of Florida is:	
2. The name a	nd the Florida street address	of the registered agent and office are:	08 DEC
	NRAI Services, Inc.		五五 二 三
		(Name)	
	2731 Executive Park Drive, S	uite 4	Committee There
	Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)	- 15 ts
	Weston	FL 33331	-
		City/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. NRAI Services, Inc.

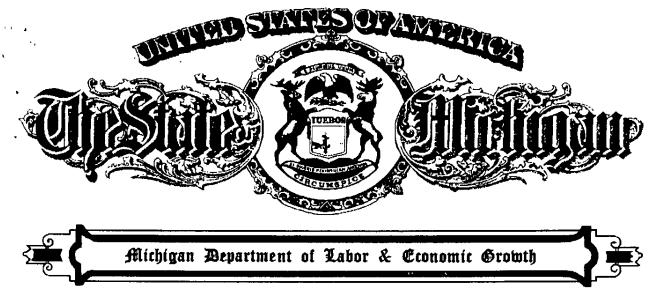
(Signature)
Christian Eubanks - Asst. Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



Lansing, Michigan

This is to Certify That

ASSURED SOURCE CORPORATE LLC

was validly organized on December 26, 2007 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States



Sent by Facsimile Transmission 972228 In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 13th day of November, 2008

Bureau of Commercial Services

Director