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COVER LETTER

| _ | stration Section sion of Corporations | | | | | | | |
|-----------------------------------|---|---|--|--|--|--|--|--|
| SUBJECT: | Intellectual Property Sys | tems LLC | | | | | | |
| | | imited Liability C | ompany) | | | | | |
| Florida," Ce | | submitted to regi | of for Authorization to Transact Business in ster the above referenced foreign limited | | | | | |
| Please return | n all correspondence concerning this | matter to the foll | owing: | | | | | |
| | Jua | an Gonzalez | | | | | | |
| | (1 | Name of Person) | | | | | | |
| Intellectual Property Systems LLC | | | | | | | | |
| | (Firm/Company) | | | | | | | |
| 609 Spinnaker | | | | | | | | |
| (Address) | | | | | | | | |
| | West | on/Florida 33 | 3326 | | | | | |
| (City/State and Zip Code) | | | | | | | | |
| For further i | information concerning this matter, p | olease call: | | | | | | |
| | Analena Stern | at (954 | 2494761 | | | | | |
| | (Name of Person) | | le & Daytime Telephone Number) | | | | | |
| Divi P.O. | ILING ADDRESS: sion of Corporations Box 6327 ahassee, FL 32314 | STREET AI Division of C Clifton Build 2661 Executi Tallahassee, | Corporations ing ve Center Circle | | | | | |
| | a check for the following amount: 25.00 Filing Fee \$\bigs\\$130.00 Filing Fee Certificate | | ing Fee & \$\bigs\bigs\\$160.00 Filing Fee, Certificate of Status & Certified Copy | | | | | |



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 18, 2008

JUAN GONZALEZ 609 SPINNAKER WESTON, FL 33326

SUBJECT: INTELLECTUAL PROPERTY SYSTEMS LLC

Ref. Number: W08000056068

We have received your document for INTELLECTUAL PROPERTY SYSTEMS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 708A00060920

APPLICATION BY FOREIGN 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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. Intellectual Pr | operty Systems LLC | clude | "Limited Liability Company," "L.L.C.," | or "LLC.") | |
|--|--|----------|---|--------------------------------|-------------------------|
| (| | | | | |
| (If name unavailable, enter consent of the managers of Company," "L.L.C.," "LL | r managing members adopting the a | pose | of transacting business in Florida and attate name. The alternate name must include | ach a copy of le "Limited L | the writter iability |
| ₂ Delaware | | 3. | 51-0411373 | | |
| (Jurisdiction under the I company is organized) | aw of which foreign limited liability | у | (FEI number, if applicable | e) | |
| 4. April 16, 2001 | • | 5. | perpetual | *11 | |
| (Date of | Organization) | | (Duration: Year limited liability compaexist or "perpetual") | iny will cease | : 10 |
| 6 | (D. C | 171 | | | |
| | (Date first transacted business in (See sections 608.501 & 608.502 F | F.S. to | da, if prior to registration.) o determine penalty liability) | 260 | 3 |
| 7. 609 Spinnake | er, Weston, Florida, 3 | 333 | | 至的 | E CHEST |
| | | | | SSE | n i |
| | (Street Addre | ess of | Principal Office) | - 43 '' | 32 8 |
| 8. If limited liability of | company is a manager-manag | ed c | ompany, check here | 9AIG | 6. tr8 |
| 9. The name and usua | al business addresses of the m | anag | ging members or managers are as f | ollows: | |
| MGRM: 4 | WAN GONZALEZ | 2 | | | |
| <u> </u> | INNIAKER | | | | |
| MESTON | FLORIDA, 333 | 2 2 | <u> </u> | - | |
| <u> </u> | 4 WKIDA , 533 | <u> </u> | <u> </u> | | |
| | | | ys old, duly authenticated by the official har is not acceptable. If the certificate is in a for | | |
| | under eath of the translator must be s | | | | ., |
| 11. Nature of busines | ss or purposes to be conducted | l or i | promoted in Florida: | | |
| | search & Developme | | Á | | |
| | Ju Fil | کمیہ | (N | | · |
| | Signature of a member or an | anth | orized representative of a member | | |
| | |), F.S | ., the execution of this document constitutes | • | |
| | | | | | |

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: | |
|---|--|
| Intellectual Property Systems 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: | |
| Juan Gonzalez | m4 |
| (Name) | 19 J |
| 609 Spinnaker | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | SSE T |
| Weston, 33326 FL | AM 9: 48 |
| City/State/Zip | Qm · |
| Having been named as registered agent and to accept service of process for the above stallability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of a relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida States (Signature) \$ 100.00 Filing Fee for Application | ent as registered ll statutes l accept the |

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTELLECTUAL PROPERTY SYSTEMS,

L.L.C." 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 SHOW, AS OF THE SEVENTH DAY OF JANUARY,

A.D. 2009.

3*382293 8300*

081220520

Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 7066454

DATE: 01-07-09

You may verify this certificate online at corp.delaware.gov/authver.shtml