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#### COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Whitespace Software, LLC	
(Name of Limi	ted Liability Company)
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited
Please return all correspondence concerning this m	atter to the following:
Antoinette Magli, Esquire	
(Nai	me of Person)
Law Offices of Fred Tromb	erg
(Fir	m/Company)
4925 Beach Boulevard	
	(Address)
Jacksonville, Florida 3220	7
(City/Sta	ite and Zip Code)
For further information concerning this matter, plea	ise call:
Antoinette Magli, Esquire	at ( 904 ) 396-5321
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 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 Fee & Certificate of}\$	\$155.00 Filing Fee & \$\sum \$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 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must incl	ude "Limited Liability Company," "L.L.C.," or "LLC.")
	ose of transacting business in Florida and attach a copy of the writernate name. The alternate name must include "Limited Liability
New York	<sub>3.</sub> 20-3470559
(Jurisdiction under the law of which foreign limited liability company is organized)	( FEI number, if applicable)
September 14, 2005	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
Upon registration	O9 I
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S	orida, if prior to registration.) . to determine penalty liability)
1819 Cherry Valley Turnpike	SSI
Skaneateles, NY 13152	7107 <b>74</b> 75 75 75 75 75 75 75 75 75 75 75 75 75
	of Principal Office)
. If limited liability company is a manager-managed	
The name and usual business addresses of the man	aging members or managers are as follows:
William J. Adams, Jr., 1054 SR 206 E., Ste. G, St. Augustin	ie, FL 32086; Linda J. Adams (same as William J. Adams, Jr.)
Thomas G. Earll, 309 E. Tanglewood	Lane, Naperville, IL 60563;
Jaco VanEeden, 4713 Shadycreek L	ane, Colleyville, TX 76034
). Attached is an original certificate of existence, no more than 90 of e jurisdiction under the law of which it is organized. (A photocopy anslation of the certificate under oath of the translator must be subr	
Nature of husiness or nurposes to be conducted or	r promoted in Florida: Any and all lawful business

Signature of a member or an authorized representative of a member. (In accordance with section 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.)

Antoinette Magli, Esquire

### 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:	
Whitespace Software, 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:	09 APR 17 SECRETAR
Charles F. Schmitt, Esquire	五百 <b>元</b>
(Name)	SEE S
4925 Beach Boulevard	F STATE FLORIDA
Florida Street Address (P.O. Box NOT ACCEPTABLE)	of o
Jacksonville, 32207 FL	<u></u>
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.

\$ 100.00 Filing Fee for Application

(Signature)

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## State of New York Department of State } ss:

I hereby certify, that WHITESPACE SOFTWARE, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 09/14/2005, and that the Limited Liability Company is existing so far as shown by the records of the Department.

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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 23rd day of March two thousand and nine.

Special Deputy Secretary of State

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