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T. CLINE JUN 29 2009 **EXAMINER**



Direct phone: 404.873.8610 Direct fax: 404.873.8611 E-mail: jack.holland@agg.com www.agg.com

June 23, 2009

Division of Corporations Registration Section P O Box 6327 Tallahassee, FL 32314

Re: G-Tracking, LLC (the "Company")

Gentlemen:

Enclosed for filing are the following documents:

1. Certificate of Existence of the Company;

2. Application by a Foreign Limited Liability Company for Authorization to Transact Business in Florida;

3. Certificate of Designation of Registered Agent/Registered Office; and

4. Check for filing fees in the amount of \$160.00.

Please forward the Designation of Registered Agent, certified copy of the Authorization to Transact Business in Florida and Certificate of Status to the undersigned in the enclosed, self-addressed envelope. Thank you.

If you have any questions, please contact the undersigned at (404) 873-8610.

Sincerely yours,

Jack K. Holland

chKHIL

JKH:pjc

Enclosures

cc: Howard S. Rosing, M.D.

2629656vI

COVER LETTER

TO:	TO: Registration Section Division of Corporations		
SUBJEC	CT: G-Tracking, LLC Name of Limited Liability Company		
The encl Existenc	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florid ce, and check are submitted to register the above referenced foreign limited liability company to transact bu	a," Certificates in Flo	te of rida.
Please re	return all correspondence concerning this matter to the following:		
	Jack K. Holland, Esq.	_	
	Name of Person		
	Arnall Golden Gregory LLP		
	Firm/Company	2009 JUN 26	megra
	171 17th Street, N.W., Suite 2100		(graphical and a second
	Address	26	Emd F
	Atlanta, GA 30363-1031	PM 1: 03	1
	City/State and Zip Code	五一	
	jack.holland@agg.com	260 ω - -	
	E-mail address: (to be used for future annual report notification)		
For furth	her information concerning this matter, please call:	,	
	Jack K. Holland at (404) 873-8610		
	Name of Person Area Code & Daytime Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclose	sed is a check for the following amount:		
[\$125.00 Filing Fee \$\ \tag{S130.00 Filing Fee & Certificate of Status} \ \ \tag{S155.00 Filing Fee & Certified Copy} \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \tag{S160.00 Filing Fee} \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \ \tag{S160.00 Filing Fee, of Status & Certified Copy} \ \ \ \ \ \ \tag{S160.00 Filing Fee, 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:

l.	G-Tracking, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.")	
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
ĊО	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the was sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability apany," "L.L.C," "LLC.")	ritte 7
2.	Georgia 3. 27-0317566 urisdiction under the law of which foreign limited liability (FEI number, if applicable)	
	urisdiction under the law of which foreign limited liability (FEI number, if applicable) ompany is organized)	
4.	May 6, 2009 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	n/a	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 16965 Verona Way, Naples, Collier County, FL 34110	
7.	16965 Verona Way, Naples, Collier County, FL 34110	ار مارون مارون
	in the second se	to the same
	(Street Address of Principal Office)	i i
o	(Street Address of Principal Office) If limited liability company is a manager-managed company, check here	,
ο.	If finited hability company is a manager-managed company, check here	
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Howard S. Rosing, M.D. 16965 Verona Way Naples, FL 34110	
		1. 1.
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of reconurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a	as in
	slation of the certificate under oath of the translator must be submitted.)	
11	Nature of business or purposes to be conducted or promoted in Florida: developing patents	
	Kilon	
	Signature of a member or an authorized representative of a member.	
	(In accordance with section 608.408(3), F.S., the elecution of this document constitutes an affirmation under the penalties of perjury that the lacts stated herein are true.)	
	Howard S. Rosing, M.D.	
	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:	
G-Tracking, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Howard S. Rosing, M.D.	2009 J
(Name)	JUN 21 ALITAS
16965 Verona Way	SER Y
Florida Street Address (P.O. Box NOT ACCEPTABLE)	2009 JUN 26 PM 1: 03 SECRETARY OF STATE TALLAHASSEE.FLORIO
Naples FL 34110	3 S
City/State/Zip	- · · · · · · · · · · · · · · · · · · ·
Having been named as registered agent and to accept service of process for the above s liability company at the place designated in this certificate, I hereby accept the appoint agent and agree to act in this capacity. I further agree to comply with the provisions of relating to the proper and complete performance of my duties, and I am familiar with as obligations of my position as registered agent as provided for in Chapter 608, Florida S (Signature) \$ 100.00 Filing Fee for Application	ment as registered fall statutes nd accept the

\$ 25.00 \$ 30.00

\$ 5.00

Designation of Registered Agent

Certified Copy (optional)
Certificate of Status (optional)

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

G-TRACKING, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 05/06/2009 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 22nd day of June, 2009

Karen C Handel Secretary of State

faun CHandel

Certification Number: 4417505-1 Reference: 25455-1

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp