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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

SEP - 1 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	ECT: ALL	SERVICES US, LLC_			
		lame of Limited Liability Company	_		
		ability Company for Authorization to Transact Business above referenced foreign limited liability company to transact			
Please	return all correspondence concerning this r	matter to the following:			
	н	IOWARD H. ELLZEY, ESQ.			
		Name of Person			
		HOWARD H. ELLZEY, P.L.			
		Firm/Company			
	721 FIRST AVENUE NORTH, SUITE 110		FASSE SE	99	
		Address	· 유	S	1
	ST. PETERSBURG, FL 33701		TARY	09 AUG 3 1	The sales of the s
City/State and Zip Code		F 0	2	ШĬ	
	how	ardellzey@howardellzey.com	STI FLO	3	Q.
		(to be used for future annual report notification)	- 골뜻	£6	
For fur	ther information concerning this matter, ple	ease call:	≯ *		
	CURTIS W. BOZEMAI	N at (727) 471-3544	1		
	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			
Enclos	sed is a check for the following amo	ount:			
	\$125.00 Filing Fee \$130.00 Filing Certificate		ing Fee, C is & Certif		

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: ALL SERVICES US, 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.") LOUISIANA (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) **JANUARY 15, 2008** (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 6. NONE (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 1415 BRYANT STREET, LEESBURG, FL 34748 (Street Address of Principal 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: ANN H. COUVILLION - MANAGING MEMBER 12231 MYERS PARK AVENUE, BATON ROUGE, LA 70810 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: 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.)

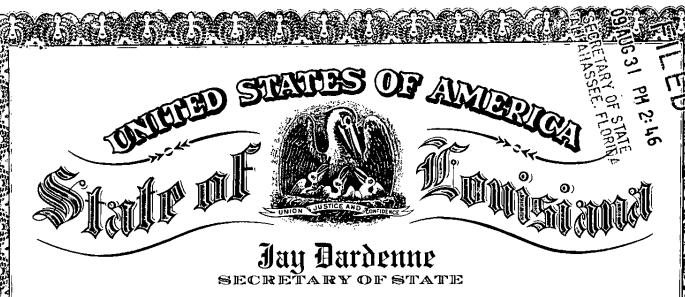
ANN H. COUVILLION
Typed or printed name of signee

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.

The name of the Limited Liability Company is: ALL SERVICES US, 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:	SE SE	<u> </u>	
HOWARD H. ELLZEY, ESQ. (Name)	ECRETAR LLAHAS	0 A I I I I I	
721 FIRST AVENUE NORTH, SUITE 110 Florida Street Address (P.O. Box NOT ACCEPTABLE)	EST 5	PK ?:	
ST. PETERSBURG FL 33701 City/State/Zip	ALE S	<u>و</u>	
Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appointme agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 Sta	ent as regis Il statutes Laccept the	stered	d

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



As Secretary of State, of the State of Louisiana, I do hereby Certify that ALL SERVICES US, LLC

A limited liability company domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on January 15, 2008,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Scal of my Office to be affixed at the City of Baton Rouge on,

July 13, 2009

AGE 36635662K

Secretary of State

