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From:

Account Name : LEVINE & PARTNERS, P.A.

Account Number: 074677001117 Phone : (305) 372-1350

Fax Number : (305)372-1352

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Wedgeworks, LLC

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October 2, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LEVINE & PARTNERS, P.A.

SUBJECT: WEDGEWORKS, LLC

REF: W09000043971

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We received your electronically transmitted document. However, the Goument has not been filed. Please make the following corrections and Grefax, the complete document, including the electronic filing cover sheet.

A centificate 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 of State, duly authenticated by the secretary of state or other deficial having custody of the records in the jurisdiction under the laws 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.

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Deborah Bruce Regulatory Specialist II FAX Aud. #: H09000211950 Letter Number: 109A00031961

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

·	We	edgeworks.	LLC ·	
(Na	ame of Foreign Limited Liability Company;	must include "Lin	ited Liability Company," "L.L.C.," or "L	LC.")
7.6	navailable, enter alternate name adopted for	1\	ancini bysices in Florida and attack a	and of the vision
onsent of	the managers or managing members adopting "LLC," "LLC.")			
	Delaware	3.	27-0877678	
(Jurisdic	ction under the law of which foreign limited y is organized)	liability	(FEI number, if applicable)	
	September 3, 2009	5.	Perpetual	
	(Date of Organization)	(D	ration: Year limited liability company wil	Il cease to
		exi	porportiar /	
	(Date See Assessed Live)		awing to manufaction \	
	(Date first transacted busin (See sections 608.501 & 60	8.502 F.S: to deter	mine penalty liability)	75 =
3250	Mary Street, Suite 306, Miami, Fl	iorida 33133		台 9
3230	Waly Check, Butto COO, What is, 17	01144 00 100		> 8
			· · · · · · · · · · · · · · · · · · ·	E ES
	(Street	Address of Princ	ipal Office)	SE N
YS1'	ited liability company is a manager-n		abiat basa	19 3
. 11 111111	ned maching company is a manager-n	nanaged compa	my, check here	
The II	ame and usual business addresses of	the managing i	nembers or managers are as follow	글
				5 元 5
Style	es Manager, LLC - 3250 Mary Str	eet, Suite 306	, Mìami, Florida 33133	>
Ucon	nden Heldinge II.C. 2250 Mari	Straat Sulfa S	Miomi Elorida 22122	
нуре	erion Holdings, LLC - 3250 Mary 8	street, Suite 3	oo, Marii, Florida 33133	
Jona	ithan Piccolo - 1172 South Dixie I	Highway, Miar	ni. Florida 33146	
-			·	
). Attach	ed is an original certificate of existence, no mor	rethan 90 days old	duly authenticated by the official having ou	stody of records
cjuridic	tion under the law of which it is organized. (A	photocopy is not a		
instation	of the certificate under cath of the translator ma	ust be submitted.)		
			oted in Florida: develop, manuf	aatum
l. Natu	re of business or purposes to be cond	nicted or prom	oted in Florida:uevelop, manuf	acture,
	market license and sell a produ-	ct utilized with	cell phones and related devices	5
				 `.
·	1			
	the fre-	·		
	Signature of a member		d representative of a member.	
·	Signature of a member (In accordance with section 60	8.408(3), F.S., the e	xecution of this document constitutes	
	Signature of a member (In accordance with section 60 an affirmation under the penal	8.408(3), F.S., the e	xecution of this document constitutes	

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.

	Wedgeworks, LLC	· · · · · · · · · · · · · · · · · · ·	
If unavailable,	the alternate to be used in the state of Florida is:		
2. The name a	nd the Florida street address of the registered agent and office are:	09 OCT	
	Alan W. Levine, Esquire	-2 FARY	1
	(Name)	HO A	T
	1110 Brickell Avenue, Suite 700	1 8: 46 FLORID	Ĺ
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	一景局も	
	Miami, FL 33131	_	
	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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "WEDGEWORKS, LLC" 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 SECOND DAY OF OCTOBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WEDGEWORKS, LLC" WAS FORMED ON THE THIRD DAY OF SEPTEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

PILED

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SECRETARY OF STATE

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090904868

AUTHENTICATION: 7562446

DATE: 10-02-09

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