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ALLAHASSEF STATE

COVER LETTER

TO:	Registration Section Division of Corporation	ns				•		
SUBJI	ECT:			tion Services LLC	,	. <u></u>		
				npany for Authorization to erenced foreign limited lial				
Please	return all correspondence	concerning this ma	tter to th	e following:				
			Ch	ris Killmeyer				
			N	ame of Person			-	
		Ki	llmeye	er Processing Inc.				
			F	irm/Company				
	<u> </u>	14	24 Gr	and Drive, Unit E			_	
				Address				,
		For	rt Lauc	derdale, FL 33312		≥ _z	22/2	
			City/S	tate and Zip Code		CRE AH		- 11
				decontracting.net	atification	SI	-22	
For fur	ther information concerni			u tor ruture annuar report i	iotineation)	E FLOR	PH 4: @8	
	Chris	Killmeyer		at (954)	383-76	324 Find	€)	
	Name	of Person	Are	a Code & Daytime Teleph	one Number			
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registr Clifton 2661 E	ET ADDRESS: on of Corporations ration Section a Building executive Center Circle assee, FL 32301				
Enclo	sed is a check for the	following amour	nt:					
	\$125.00 Filing Fee	\$130.00 Filing Certificate of		\$155.00 Filing Fee of Certified Cop		Filing Fee, atus & Cert		

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.	Blade Construction Services LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	_
<u></u>	N/A f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the	writter
ÇO	onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil ompany," "L.L.C," "LLC.")	
2.	New York (Jurisdiction under the law of which foreign limited liability 3. 26-1717961 (FEI number, if applicable)	_
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4.	December 20, 2007 (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.	Upon Licensure	_
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	188 Van Buren St.	. 19
	Staten Island, NY 10301	-
	(Street Address of Principal Office)	m
8.	If limited liability company is a manager-managed company, check here	O
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Dale Edwards-El - Managing Member	
	Teresa Punzone - Managing Member	
	Vanessa Depompo - Managing Member, Mary Ellen Lerie - Managing Member	
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receptrication under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)	ords in
11	. Nature of business or purposes to be conducted or promoted in Florida: General Contracting	
	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 penaltics of perjury that the facts stated herein are true.)	
	Dale Edwards-El, MGRM	

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:		
Blade Construction Services LLC		
If unavailable, the alternate to be used in the state of Florida is:		
N/A		
2. The name and the Florida street address of the registered agent and office are:	SECRETALIANA	Local
Dale Edwards-El	22 487 888	-
(Name)	PH L: EFFLOO	
4699 N. Federal Highway, Suite 103D	4: 88 STATE ORID	**u.
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Pompano Beach FL 33064	_	
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)

State of New York Department of State } ss:

I hereby certify, that BLADE CONSTRUCTION SERVICES LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/20/2007, and that the Limited Liability Company is existing so far as shown by the records of the Department.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 14th day of July two thousand and ten.

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