Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (950)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number: I20080000067

: (845)425-0077

Fax Number : (845)818-3588

gi trani ka jiinna un addigama mamamin kigayaya ki ta may i a kigama pikigasi a mi mi mi kimaka kida i mii mi maka kida i mii mi maka kida i mii na addiga a mii na addiga

**Enter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please. **

Foreign Limited Liability Company iPacesetters, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

11/12/2010

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 POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: i Pacesetters, 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.") 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. October 8, 2003 5. Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. Upon qualification (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 1280 S. Country Club; Suite 110 ထု Mesa, AZ 85210 (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: Gerard DeBiasi, Kidd & Company, LLC, Suite 110, 1280 S. Country Club Drive, Mesa, AZ 85210 James Marley, HSBC Capital (USA) Inc., 452 Fifth Ave., New York, NY 10018 Claudine Singer, Intersection, LLC, 979 Post Road Bast, Westport, CT 06880 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: To engage in any lawful business as the member may determine, and perform any activities incidental to the foregoing Signature of a member or an authorized representative of a member. (In accordance with section 608.408(1), F.S., the execution of this document constitutes an affirmation under the penalties of perjuly that the facts staind herein are true. I am aware that any Laise information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) 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.

f unavailable, the	alternate to be used in	the state of Florida is:	
2. The name and the	ne Florida street addre:	ess of the registered agent and office are:	
<u>Vc</u>	orp Services, LLC	(Name)	10 NOV
	00 W Camino Real, Su	nite 102 (Palm Beach County)	15 An
720		Address (P.O. Box NOT ACCEPTABLE)	

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.

Veorp Services, LLC.

3y: /////

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

DAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IPACESETTERS, 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 TWELFTH DAY OF NOVEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IPACESETTERS, LLC" WAS FORMED ON THE EIGHTH DAY OF OCTOBER, A.D. 2003.

AND I DO HERBBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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You may varify this certificate online at cosp. delaware, gov/authver, shimi

AUTHENTS CATION: 8350585

DATE: 11-12-10