# M12000000 951

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |

Office Use Only



100221959101

RECEIVES

12 FEB 20 PM 1: 51

SECRETARY OF STATE

and the second

T. CLINE
FEB 2 1 2012
EXAMINER



| ION CENTICE COMITANT                   |               |                           |         |  |  |
|--|---------------|---------------------------|---------|--|--|
| A                                      | CCOUNT NO.    | : 120000001               | .95     |  |  |
|  | REFERENCE     | : 087271                  | 7871038 |  |  |
| AUT                                    | HORIZATION    | Smill de                  | man     |  |  |
|  | COST LIMIT    | : \$125.00                |         |  | _  |
| ORDER DATE : Febru                     | ary 7, 2012   |                           |         |  |  |
| ORDER TIME : 11:45                     | AM            |                           |         |  |  |
| ORDER NO. : 08727                      | 1-001         |                           |         |  |  |
| CUSTOMER NO: 78                        | 71038         |                           |         |  |  |
| NAME: ET                               | FOREIGN FI    | _                         |         |  |  |
| XXXX QUALIFICATION PLEASE RETURN THE F |               |                           | NC .    | 2012 FEB 20<br>SECRETARY<br>INLLAHASSE | See See  |
| CERTIFIED C                            | OPY           |                           | NG:     | M 9: 56                                | Store with a second sec |
| CONTACT PERSON: St                     | ephanie Milne | es EXT# 29<br>EXAMINER: _ | 20      |  |  |

### WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

| We, the undersigned, do hereby certify that we are the Managers and/or Managing  |       |
|--|-------|
| Members of ETC GROUP, LLC  |       |
| (Name of Limited Liability Company)  |       |
| a limited liability company duly organized and existing under the laws of  |       |
| DELAWARE   |       |
| (State or Country of Organization)   |       |
| Because the name of this foreign limited liability company does not satisfy the  |       |
| requirements of the s. 608.406, F.S., the limited liability company hereby adopts the  |       |
| following name to transact business in the state of Florida:   |       |
| ETC GROUP USA, LLC   |       |
| (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.) |       |
| Date: February 9, 2012   |       |
| Signature(s) of Manager(s) and/or/Managing Member(s):  |       |
|  |       |
| <del></del>  |       |
|  | 2012  |
| TECT 1   | FE9   |
| <u> </u>   | 3 20  |
|  |       |
|  |       |
| <u> </u>   | 122   |
|  | 902 T |

#### 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:

| ENVIRED LABILATION OF THE STATE OF FLORIDAL   |         |
|---|---------|
| 1 ETC GROUP, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.,"   | _       |
| ETC GROUP USA, LLC  | ,       |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liab Company," "L.L.C," "LLC;")  |         |
| 2. DELAWARE  (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)   | -       |
| 4. 02/19/2008 5. PERPETUAL (Duration: Year limited liability company will cease to  | -       |
| 6. N/A  | <b></b> |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)   |         |
| 7. 7712 LINKSIDE LOOP   | •       |
| REUNION, FL 34747 (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:  | 2012    |
| DAVID J. MALFARA SR., 7712 LINKSIDE LOOP, REUNION, FL 34747   | FE3 2   |
|   | 0       |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recthe 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.) | ords in |
| 11. Nature of business or purposes to be conducted or promoted in Florida: CONSULTING   |         |
| Sant Malfur, fr.  |         |
| Signature of a member of an anthorized 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)  DAVID J. MALFARA SR.  |         |

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 C         | Company is:  |                   |
|-----------------------------|------------------------------------|--|-------------------|
| ETC GROUI                   | P, LLC                             |  |                   |
| If unavailable<br>ETC GROUP | the alternate to be used OUSA, LLC | in the state of Florida is:  |                   |
| 2. The name                 | and the Florida street add         | ress of the registered agent and office are:   |                   |
|                             | Corporation Service Co             |  | -                 |
|                             |                                    | (Name)   |                   |
|                             | 1201 Hays Street                   |  |                   |
|                             | Florida Stree                      | 1 Address (P.O. Box NOT ACCEPTABLE)  | -                 |
|                             | Tallahassee                        | FL 32301   | •                 |
|                             |                                    | City/State/Zip   |                   |
| liability compo             | my at the place designated         | and to accept service of process for the above st<br>in this certificate, I hereby accept the appointm | nent as registere |

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.

Corporation Service Company

By:

(Signate

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ETC GROUP, 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 SEVENTEENTH DAY OF FEBRUARY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ETC GROUP,

LLC" WAS FORMED ON THE NINETEENTH DAY OF FEBRUARY, A.D. 2008.

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

4506139 8300

120188447

AUTHENT CATION: 9373531

DATE: 02-17-12

You may verify this certificate online at corp.delaware.gov/authver.shtml