Qualification/Tax Lien Sr ion 6479---01031--010 Division of Corporations ****206.25 SUBJECT: Anderson & Associates International Consulting, L.L.C. (Name of corporation - must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida, Please return all correspondence concerning this matter to the following: Daniel W. Anderson (Name of Person) Anderson & Associates International Consulting, L.L.C. (Firm/Company) 14535 Falling Tree Court (Address) Orlando, FL 32837 (City/State/Zip) Should you need to call someone concerning this matter, please call: Daniel W. Anderson 856-7303 (Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Name Availability Documdut Examinar epoater Podyfei Versiyer Acknowledgement W. P. Verifyer



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 7, 1997

DANIEL W. ANDERSON ANDERSON & ASSOCIATES INTERNATIONAL CONS 14535 FALLING TREE COURT ORLANDO, FL 32837

SUBJECT: ANDERSON & ASSOCIATES INTERNATIONAL CONSULTING, LL.C.

Ref. Number: W97000022909

We have received your document for ANDERSON & ASSOCIATES INTERNATIONAL CONSULTING, L.L.C. and check(s) totaling \$78.75 of which \$78.75 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$206.25 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline Document Specialist

Letter Number: 397A00049168



Thursday, October 16, 1997

Florida Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

Attn: Ms. Tammi Cline

Re: Number W97000022909

Dear Ms. Cline:

Thank you for your speedy reply. In your letter of 07 October 1997 requesting that we complete additional forms and provide additional funds for our registration as a foreign corporation. Enclosed, please find the completed forms, along with our check for \$206.25. Please feel free to call if we can be of further assistance.

With Kind Regards,

Daniel W. Anderson,

President

DWA:lc

97 COT 29 PM 4: 15

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:

Anderson & Associates International Consulting, L.L.C.

	State of Delaware		3.	59-3444287		
urisdict impany	ion under the law of which foreign is organized)	imited liability		(FEI number, if app	olicable)	
	13 May 1997		5.	13 May 2004		
	(Date of Organization)			(Duration: Year limited liability c exist or "perpetual")	ompany will eas	
	13 May 1997					
	(Date first transacted business	in Florida. (See	šect	ions 608,501, 608,502, and 817.15	55, F.\$.)	
	145	35 Falling	Гге	e Court		
	Orla	ando, Florid	a 3	32837-7044	 -	
		(Street address of			<u> </u>	
	ne, title, and business address on age the foreign limited liability NAME & ADDRESS:			member[MGRM] or manager	if necessary)	
	tage the foreign limited liability	y company in	Flo	member[MGRM] or manager		
	NAME & ADDRESS:	y company in TITLE: Preciden	Flo	member[MGRM] or manager	if necessary)	
	NAME & ADDRESS: Daniel W. Anderson	TITLE: Preciden	Flo	member[MGRM] or manager	TITLE:	
	NAME & ADDRESS: Daniel W. Anderson 14535 Falling Tree Cou	TITLE: Preciden	Flo	member[MGRM] or manager inda: (attach additional page i	TITLE:	
	NAME & ADDRESS: Daniel W. Anderson 14535 Falling Tree Cou	TITLE: Preciden	Flo	member[MGRM] or manager inda: (attach additional page i	TITLE:	
	NAME & ADDRESS: Daniel W. Anderson 14535 Falling Tree Cou	TITLE: Preciden	Flo	member[MGRM] or manager inda: (attach additional page i	TITLE:	
	NAME & ADDRESS: Daniel W. Anderson 14535 Falling Tree Cou	TITLE: Preciden	Flo	member[MGRM] or manager inda: (attach additional page in NAME & ADDRESS:	TITLE:	
	NAME & ADDRESS: Daniel W. Anderson 14535 Falling Tree Cou	TITLE: Preciden	Flo	member[MGRM] or manager inda: (attach additional page in NAME & ADDRESS:	TITLE:	
	NAME & ADDRESS: Daniel W. Anderson 14535 Falling Tree Cou	TITLE: Preciden	Flo	member[MGRM] or manager inda: (attach additional page in NAME & ADDRESS:	TITLE:	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608,415 or 608,507, FLORIDA STATUTES, THE UNDERSIGNATION LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATION REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

1	The name of the Limited Liability Company is:		
_	Anderson & Associates International Consulting, L.L.C.	<u> </u>	_
2.	The name and address of the registered agent and office are:		
	Daniel W. Anderson	5.5	
	(Name)	T. ⊖	
	14535 Falling Tree Court	 	
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)		
	Orlando, Florida 32837-7044	ā.	10.00 10.00
	(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.

October 15, 1997

(Signature)

(Date)

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of					
1) the above named limited liability company has at least two members					
2) the total amount of cash contributed by the member(s) is	s_1,000.C0				
3) if any, the agreed value of property other than cash contributed by member(s) is A description of the property is estached and made a part hereto	s				
4) the amount c, cash or property anticipated to be contributed by member(s) is. This total includes amounts from 2 and 3 above.	\$ 1 000 00				
5) the wal amount of cash or property anticipated to be contributed by member(s) is	s_1,000.00				

Signature of a member or authorized representative of a member. (In accordance with section 608 408(3), Florals Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true?)

Filing Fee: \$250.00 for Application and Affidavit

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANDERSON & ASSOCIATES INTERNATIONAL CONSULTING, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANLING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF OCTOBER, A.D. 1997.

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10-08-97