M9700000720 THE UNITED STATES GORPORATION GOMPANY

ACCOUNT NO.

072100000032

REFERENCE :

582083

4312639

AUTHORIZATION-

COST LIMIT

ORDER DATE : October 29, 1997

ORDER TIME : 11:12 AM

ORDER NO. : 582083-010

700002333047--8

CUSTOMER NO:

4312639

CUSTOMER: Ms. Mary Keogh

Skadden Arps Slate Meagher &

One Rodney Square

Po Box 636

Wilmington, DE 19899

FOREIGN FILINGS

NAME:

PERMASEP SOLUTIONS-PINELLAS,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

97 OCT 29 PM 4: 09

97 OCT 29 PM



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 29, 1997

KAREN ROZAR CSC NETWORKS TALLAHASSEE, FL

SUBJECT: PERMASEP SOLUTIONS-PINELLAS LLC

Ref. Number: W97000024662



We have received your document for PERMASEP SOLUTIONS-PINELLAS LLC and the authorization to debit your account in the amount of \$285.00. However, the document has not been filed and is being returned for the following:

All Items on the AFFIDAVIT must be completed. If ITEM 3 is "zero", please indicate. The amount in ITEM 4 must be at least \$100.00.

ALSO PLEASE indicate which one of your documents has the ORIGINAL signatures.

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

If you have any questions concerning the filing of your document, please call (859),487-6914.

Buck Kohr

Corporate Specialist Letter Number: 197A00052598

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:

	in the name at present.)		
. Delaware		3. pending	lias Na
(Jurisdiction under the la company is organized)	w of which foreign limited lia	bility (FEI number, if app	incable)
October 27, 1997		rpetual	97 YS
(Date of Organization		ation: Year limited liability company wi perpetual")	II cease to a series of cease
Upon Qualification	ın		
(Date first transacted bu	siness in Florida. (See sections	608.501, 608.502 and 817.155, F.S.)	PM 4: 09
. Glasgow Building	200, P.O. Box 6101		09
Newark, DE 1971	1 Street address of principal of		<u></u>
member [MGRM] or (attach additional page if NAME & ADDRESS	necessery)	ot necessary to list members. NAME & ADDRESS:	TITLE:
William R. Spenc	er Mgr.		
Glasgow Building	200		
			_
P.O. Box 6101			-
			- -
P.O. Box 6101			
P.O. Box 6101 Newark, DE 1971	Jr. Mgr.		
P.O. Box 6101 Newark, DE 1971 Doyle R. Barton,	Jr. Mgr.		- - - - -

Filing Fee: \$ 52.50 for Application

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN
LIMITED LIABILITY COMPANY

The undersigned member or authorized represen	tative of a member of Permasep Solutions
Pinellas LLC	deposes and says:
1) the above named limited liability company has	at least two members
2) the total amount of cash contributed by the me	ember(s) is \$ 100 .
3) if any, the agreed value of property other than \$ A description of the pr	cash contributed by member(s) is operty is attached and made a part hereto.
4) the total amount of cash or property anticipated $\frac{100}{}$. This total includes amoun	
Millian Sen	
Signature of a member of actinorized of a member of actinorized of the section 409.408(3), Florida Section under the penalties of perjudical section and the penalties of perjudical section actinorized the penalties of perjudical section actinorized the section actinorized to section actinoriz	tatutes, the execution of this efficient

Filing Fee: \$52.50 for Affidavit

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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the limited liability company is: Permasep Solutions-Pinellas	97 OCT 29	NO SECURITY OF CO.
2.	The name and address of the registered agent and office is:	PH 4: 09	OF STATE OHS
	Corporation Service Company (Neme)		
	1201 Hays Street		
	(P.O. Box not acceptable)		
	Tallahassee, Florida 32301		
	(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.

CORPORATION SERVICE COMPANY

FILINGFEE: \$35 for Designation of Registered Agent

State of Delaware

PAGE 1

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PERMASEP SOLUTIONS-PINELLAS 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 TWENTY-EIGHTH DAY OF OCTOBER, A.D.

1997.

79 PM 1: 09

Edward J. Freel, Secretary of State

8725480

AUTHENTICATION:

10-28-97

2813366 8300

971363346

DATE: