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C T Corporation Syst	tem.		
Requestor's Name 660 East Jefferson Street		20002452452- -03/10/980107100 ****232.50 ****232	
Address Tallahassee, FL 323	301		
City State Zip	Phone	200002452452- -03/10/980107100 *****52.50 ******52	
CORPORATIO	DN(S) NAME	******52.58 ******52	
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CR2E031 (1-89)

W.P. Verifier

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:

Experts on Sight LLC			
(Name of foreign limited liability of	company must end	with the words "limited compan	y" or their abbreviation
"L.C." if not so contained in the n	name at present.)		
_ ,	_	2 Applied for	
Delaware (Jurisdiction under the law of whi	ich foreign limited li	3. <u>Applied for</u> ability (FEI numbe	er if applicable)
company is organized)	ich loreign innited it	ability (. E. Harriso	,, ii application
company is organized)			
. January 22, 1998	5. Dec	cember 31, 2028	9
(Date of Organization)		ation: Year limited liability com	
	or	"perpetual")	至 吳
1109			MAR 10 PM 2: 19
. 4-1-98 (Date first transacted business in	Florida (See sections	608 501 608 502 and 817 155, F.S.)	9 5 ² E
(Date IIIst transacted business in	11 1011da. (Gee Scolons	, doc.oo i, doc.ooz diid o i i i oo, i i oo,	구 경우 ⁶
		1.1. 37 05060	- 2 ST
. 15150 N. Hayden Road, Su	iite IIU, Scott	Sdale, AZ 85200	
			9 9
(Street ac	ddress of principal o	ffice)	- · · · · · · · · · · · · · · · · · · ·
•			
 List and indicate in title spa member [MGRM] or manag (attach additional page if necessary 	jer [MGR]. It is n	of necessary to list membe	rs.
NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	: TITLE:
Glenn Spina	MGR	Contract of the Contract of th	
15150 N. Hayden Road,	• <u>-</u>		
Suite 110, Scottsdale,			
Darco rroy bootspaceroy	•		
AZ 85260			
		•	
			
	•		
		<u> </u>	

Filing Fee: \$ 52.50 for Application

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of Experts on Sight

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 member(s) is \$1,100,000.00 .

3) if any, the agreed value of property other than cash contributed by member(s) is \$0.00 . A description of the property is attached and made a part hereto.

4) the total amount of cash or property anticipated to be contributed by member(s) is \$1,100,000.00 . This total includes amounts from 2 and 3 above.

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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.

The na	me of the limited liability company is: Experts on Sight LLC
The na	me and address of the registered agent and office is:
The na	
Γhe na: —	me and address of the registered agent and office is: C T CORPORATION SYSTEM (Name)
Γhe na	C T CORPORATION SYSTEM (Name)
Γhe na. 	C T CORPORATION SYSTEM (Name) c/o-C T CORPORATION, 1200 South Pine Island Road,
Гће па. —	C T CORPORATION SYSTEM (Name)
Гће па: —	C T CORPORATION SYSTEM (Name) c/o-C T CORPORATION, 1200 South Pine Island Road,

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.

C T CORPORATION SYSTEM

Comic Bass	3/10/98
(Signature) Å	(Date)

CONNIE BRYAN SPECIAL ASSISTANT SECRETARY

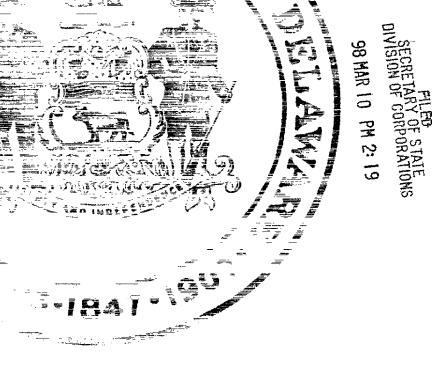
FILING FEE: \$35 for Designation of Registered Agent

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "EXPERTS ON SIGHT 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 SIXTH DAY OF MARCH, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.





Edward J. Freel, Secretary of State

AUTHENTICATION:

8957193

2849877 8300

DATE: