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\*\*\*\*285.00 \*\*\*\*285.00 CORPORATION NAME(S) AND DOCUMENT NUMBER(S) (if known): The Page Group. com, L.L.C. Walk In Pick Up Time Certified Copy Mail Out Certificate of Status Will Wait Certificate of Good Standing RUSH Photocopy ARTICLES ONLY ALL CHARTER DOCS ENEW FILINGS AMENDMENTS THE PROPERTY OF THE Profit Amendment Resignation of R.A. Officer/Director NonProfit Limited Liability Change of Registered Agent Certificate of FICTITIOUS NA Domestication Dissolution/Withdrawal FICTITIOUS NAME SEARCH Other Merger CORP SEARCH 强重OTHER FILINGS REGISTRATION/QUALIFICATION Annual Recort Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 1, 1999

**UCC FILING & SEARCH SERVICES** 

SUBJECT: THEPAGEGROUP.COM, L.L.C.

Ref. Number: W99000015330

RUSH

Conected. Please backdate

We have received your document for THEPAGEGROUP.COM, L.L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The affidavit must set forth the amount of the cash and a description and the agreed value of property other than cash contributed by the members, and the amount anticipated to be contributed by the members.

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) 487-6043.

Shawn Logan Document Specialist

Letter Number: 899A00034766

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MALEN SCHOOL STATES

99 JUL -1 AM ID: 11
SECRETARY OF STA JUL
TALLAHASSEE, FLORINA

### 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:

Delaware	3.	applied for	
sdiction under the law of which foreign limited pany is organized)	liability	(FEI number, if application	able)
May 3, 1999 (Date of Organization)		perpetual	nnany will cease to
		(Duration: Year limited liability company will cease to exist or "perpetual")	
Upon registration			
(Date first transacted business in Flo	orida. (See s	ections 608.501, 608.502, and 817.155	5, F.S.)
1133 Fourth Street	<del> </del>		
Sarasota, FL 34236			
name, title, and business address of eac manage the foreign limited liability con	ch managir npany in F	lorida: (attach additional page i	-[MGR]who f necessary) TITLE:
name, title, and business address of eac manage the foreign limited liability con  NAME & ADDRESS: T Assist Integrated	ch managir npany in F	g member[MGRM] or manager	i necessary)
name, title, and business address of eac manage the foreign limited liability com	ch managir npany in F	ng member[MGRM] or manager Torida: (attach additional page i	i necessary)
name, title, and business address of eac manage the foreign limited liability com  NAME & ADDRESS: T  Assist Integrated Technologies, L.L.C. M	ch managir npany in F	ng member[MGRM] or manager Torida: (attach additional page i	i necessary)
name, title, and business address of eac manage the foreign limited liability com  NAME & ADDRESS: The Assist Integrated Technologies, L.L.C. M  1133 Fourth St.	ch managir npany in F	ng member[MGRM] or manager Torida: (attach additional page i	i necessary)
name, title, and business address of eac manage the foreign limited liability com  NAME & ADDRESS: T Assist Integrated Technologies, L.L.C. M  1133 Fourth St.	ch managir npany in F	ng member[MGRM] or manager Torida: (attach additional page i	i necessary)
name, title, and business address of eac manage the foreign limited liability com  NAME & ADDRESS: T Assist Integrated Technologies, L.L.C. M  1133 Fourth St.	ch managir npany in F	ng member[MGRM] or manager Torida: (attach additional page i	i necessary)
name, title, and business address of eac manage the foreign limited liability com  NAME & ADDRESS: T Assist Integrated Technologies, L.L.C. M  1133 Fourth St.	ch managir npany in F	ng member[MGRM] or manager Torida: (attach additional page i	TITLE:  99 JUL - I SECRETARY  TALLAHASSE
name, title, and business address of eac manage the foreign limited liability com  NAME & ADDRESS: T Assist Integrated Technologies, L.L.C. M  1133 Fourth St.	ch managir npany in F	ng member[MGRM] or manager Torida: (attach additional page i	i necessary)

<sup>9.</sup> Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state 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.)

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

. The undersigne	ed member or authorized representative of a member ofThePageGro	up.com
L.L.C.	certifies:	
1) the above na	amed limited liability company has at least one member;	
2) the total am	ount of cash contributed by the member(s) is	\$ <u>100.00</u> ;
3) if any, the a (A descripti	greed value of property other than cash contributed by member(s) is on of the property is attached and made a part hereto.)	\$;
hy member(	nount of cash and property contributed and anticipated to be contributed (s) is noludes amounts from 2 and 3 above.)	\$ 100.00
1	ASSIST INTEGRATED TECHNOLOGIES, L.L.C.	
-	Signature of a member or an authorized representative of a mem  (In accordance with section 608,408(3), Florida Statutes, the execution of this affidavit constitutes affirmation under the penalties of perjury that the facts stated herein are fulf.)  Typed or printed name of signee	ber.
	-JF L	

Filing Fee: \$250.00 for Application and Affidavit

SECRETARY OF STATE

## 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 Comp	pany is:	
ThePageGroup.com L.L.C.		
2. The name and the Florida street address	s of the registered	agent and office are:
Stephen H. Watki	(Name)	
1133 Fourth Stre	eet ddress (P.O. Box <u>NO</u>	T ACCEPTABLE)
Sarasota	FL City/State/Zip	34236

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.

NIGHT IN

(Signature)
Stephen H. Watkins

Filing Fee: \$ 35 for Designation of Registered Agent

SECRETARY OF STATE
SECRETARY OF STATE

#### State of Delaware

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#### Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THEPAGEGROUP.COM L.L.C." 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-NINTH DAY OF JUNE, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID
"THEPAGEGROUP COM L.L.C." WAS FORMED ON THE THIRD DAY OF MAY,
A.D. 1999.

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

Edward J. Freel, Secretary of State

DATE:

**AUTHENTICATION:** 

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06-29-99