Filing Fee: \$150.00

ID Number: 150833



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, I956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The name of the limited liability company is: Databank IMX LLC						
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:						
3.	The limited liability company is organized under the laws of	Delaware					
4.	The date of its organization is May 10, 2005						
5.	The period of duration of the limited liability company is (if perpetual, so state) perpetual						
6.	The address of the limited liability company's resident agent	in Rhode Island is:					
	10 Wcybosset Street	Providence	, RI	02903			
	(Street Address, <u>not</u> P.O. Box)	(City/Town)		(Zi	p Code)	
7.	and the name of the resident agent at such address is C T Corporation System (Name of Agent) The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.						
8.	The address of any office required to be maintained in th limited liability company is organized is:	e state or other jurisdiction	under	the laws	s of w	hich the	
	N/A						
					05	<u>cò</u>	
9.	The mailing address for the limited liability company is:				SEP	0.5 C.	
	455 Pennsylvania Avenue, Suite 200, Ft. Washington, PA 19034				2	22.20	
		FILED)		A	377	
		SEP 23 20	105		11:38	F STA	
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10 Management of the Limited Liebility (```				
10. Management of the Limited Liability C	lanagement of the Limited Liability Company:				
A. The limited liability company is to be managed by its members. (If you have checked this box, no. 11.)					
	<u>or</u>				
B. The limited liability company is to be managed by one (1) or more managers. (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)					
<u>Manager</u>	Address				
Richard Aschman	455 Pennsylvania Avenue, Suite 200, Ft. Washington, PA 19034				
Charles J. Bauer, Jr.	455 Pennsylvania Avenue, Suite 200, Ft. Washington, PA 19034				
Robert Bauer	455 Pennsylvania Avenue, Suite 200, Ft. Washington, PA 19034				
Denis Gonseth	455 Pennsylvania Avenue, Suite 200, Ft. Washington, PA 19034				
11. This application is accompanied by a cer authorized officer of the jurisdiction under Date: Scptcmber 21, 2005	trificate of good standing duly authenticated by the secretary of state or other rewhich the foreign limited liability company was organized. Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. Databank IMX LLC Print Exact Name of Limited Liability Company Making Application By AMM A. Puffic Company Making Application Signature of authorized person				

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DATABANK IMX 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-FIRST DAY OF SEPTEMBER, A.D. 2005.

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



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4172662

DATE: 09-21-05