Filing Fee: \$150.00

ID Number: 149648



## 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

us Jul 29

## 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:  AVAD LLC			
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:			
3.	• • •	fDelaware		
4.	The date of its organization is06/09/05	· <del></del>	· · · · · · · · · · · · · · · · · · ·	
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 Weybosset Street	Providence	, RI <u>02903</u>	
	(Street Address, not P.O. Box)	(City/Town)	(Zip Code)	
	and the name of the resident agent at such address is C T Corporation System			
	•	(Name	of Agent)	
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at a time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonab diligence.			
8.	The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:			
	16201 Stagg Street, Van Nuys, CA 9	1406		
9.	The mailing address for the limited liability company is:			
	16201 Stagg Street, Van Nuys, CA 9	1406	<del></del>	
			FILEL	
			uu oo anne	

Form No. 450 Revised: 07/05 JUL 29 2005
By 7569

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10.	Management of the Limited Liability Con	npany:			
A.	The limited liability company is to be ma no. 11.)	naged by its members. (If you have checked this box, go to item			
	<u>or</u>				
В.	B. The limited liability company is to be managed x by one (1) or more managers. (If the limited liability company has managers at the time of the filling of these Articles of Organization, state the name and address of each manager.)				
	<u>Manager</u>	<u>Address</u>			
Ke	eith W.F. Bradley	16201 Stagg Street, Van Nuys, CA 91406			
R	Ichard S. Donohue	16201 Stagg Street, Van Nuys, CA 91406			
	is application is accompanied by a certific	cate of good standing duly authenticated by the secretary of state or other			
		hich the foreign limited liability company was organized.			
Application for Registration, including		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.			
Date:	July 8, 2005	AVAD LLC			
		Print Exact Name of Limited Liability Company Making Application			
	E	sy Keth WF Browdley			
		Signature of authorized person Keith W.F. Bradley			

Delaware PAGE 1

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVAD 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 TWENTIETH DAY OF JULY, A.D. 2005.

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



Varriet Smith Hindson Harriet Smith Windsor, Secretary of State

3983112 8300

**AUTHENTICATION: 4034956** 

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DATE: 07-20-05