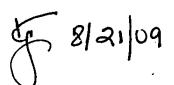
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

*FILLED
SECRETARY OF STATE
OUTSION OF CORPORATIONS

2009 AUG 20 PM 2: 18

Certified Copy

	OUD HUG ZU PM Z:]
TO: New Filing Section Division of Corporations	
SUBJECT: Weber Management Corporation	
Name of corporation - must include suffix	
Dear Sir or Madam:	
Deat on Wagain.	
The enclosed "Application by Foreign Corporation for Authorization to Transact Bu "Certificate of Existence," and check are submitted to register the above referenced transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Peanne A. Weber Kush Name of Person	
Wabor Management Corporation	
→ Firm/Company	
720 East Main Street	
Address	
P. 1 T. 1.	١
Bichmond Indiana 47374	1
City/State and Zip code	
E-mail address: Ito be used for future annual report notific	<u>n</u>
E-mail address: (to be used for future annual report notific	cation)
For further information concerning this matter, please call:	
•	
Jeanne A. Weber Rushit (317) 885-0555	
Name of Person Area Code & Daytime Telephone N	Jumher
The court is Buy time receptions.	· · · · · · · · · · · · · · · · · · ·
STREET/COURIER ADDRESS: MAILING ADDR	ESS.
New Filing Section New Filing Section	
Division of Corporations Division of Corpora	
Clifton Building P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32	314
Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\sum \\$78.75 Filing Fee & \$\sum \\$78.75 Filing Fee & \$\sum \\$\$	
Certificate of Status Certified Copy	Certificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. 56-2545358

(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Main Street Richmond. In. 47374
(Principal office address) inunciation Circle Ave Maria, Florid
(Current mailing address) poorol & Accessories - Rotal (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Marinelli (Baron Collier Compan Name: Office Address: 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: SECRETARY OF STATE A. DIRECTORS Chairman: ______ 2009 AUG 20 PM 2: 18 Address: __ ______ Vice Chairman: Address: ____ Address: ______ Director: Address: **B. OFFICERS** A. Wober Rush President: Address: 6. 46142 ____ Purkhiser Vice President: Address: Wober Rush Secretary: ___ spe above Address: eanne A. Weber Rush Treasurer: (see above) Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Weber-Rush

Signature of Director or Officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

A. Weber-Rush (President)

13.

14.

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

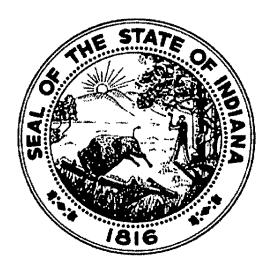
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

WEBER MANAGEMENT CORPORATION

duly filed the requisite documents to commence business activities under the laws of State of Indiana on July 20, 2005, and was in existence or authorized to transact business in the State of Indiana on August 11, 2009.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eleventh Day of August, 2009.

TODD ROKITA, Secretary of State

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