

Document Number Only  
**F96000006471**

CT CORPORATION SYSTEM

Requestor's Name  
660 East Jefferson Street

Address  
Tallahassee, FL 32301 222-1092

City State Zip Phone

CORPORATION(S) NAME

300002025243-5  
-12/11/96-UT069-027  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

300002025243-5  
-12/11/96-UT069-028  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

*ALS Leasing, Inc.*

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# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION #07.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE  
STATE OF FLORIDA:

1. ALS Leasing, Inc.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware  
(State or country under the law of which it is incorporated)
3. Applied For  
(FEI number, if applicable)

4. November 22, 1996  
(Date of incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.156, F.S.))

7. 450 N. Sunnyslope Road, Suite 300, Brookfield, Wisconsin 53005  
(Current mailing address)


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8. See attached purpose clause  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:
- Name: C T Corporation System
- Office Address: c/o C T Corporation System, 1200 South Pine Island Road
- Plantation, Florida, 33324  
(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System

  
 \_\_\_\_\_  
 (Registered agent's signature) (Officer)

  
 \_\_\_\_\_  
 (Type Name and Title of Officer)

John S. Masters, Asst. Secy.

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 addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: see attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: see attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: see attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: see attached list of officers

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Thomas F. Kelly  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Thomas F. Komula, Vice President  
(Typed or printed name and capacity of person signing application)

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**Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida**

**Purpose Clause of  
ALS Leasing, Inc.**

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Leasing property and operating assisted living facilities and engaging in any other lawful act or activity which corporations may be authorized to conduct under the laws of this state.

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**OFFICERS & DIRECTORS OF  
ALS LEASING, INC.**

**William G. Petty, Jr.**  
**Business Address:**  
**184 Shuman Boulevard, Suite 200**  
**Naperville, IL 60563**

**Director**

**Home Address:**  
**928 Rockbridge Drive**  
**Naperville, IL 60540**

**William F. Lasky**  
**Business Address:**  
**450 N. Sunnyslope Drive, Suite 300**  
**Brookfield, WI 53005**

**Director, President**

**Home Address:**  
**808 East Fox Lane**  
**Fox Point, WI 53217**

**John W. Kneen**  
**Business Address:**  
**184 Shuman Boulevard, Suite 200**  
**Naperville, IL 60563**

**Director, Vice President**  
**Assistant Secretary**

**Home Address:**  
**1394 Shady Lane**  
**Wheaton, IL 60187**

**Thomas E. Komula**  
**Business Address:**  
**450 N. Sunnyslope Drive, Suite 300**  
**Brookfield, WI 53005**

**Director, Vice President**  
**Secretary, Treasurer**

**Home Address:**

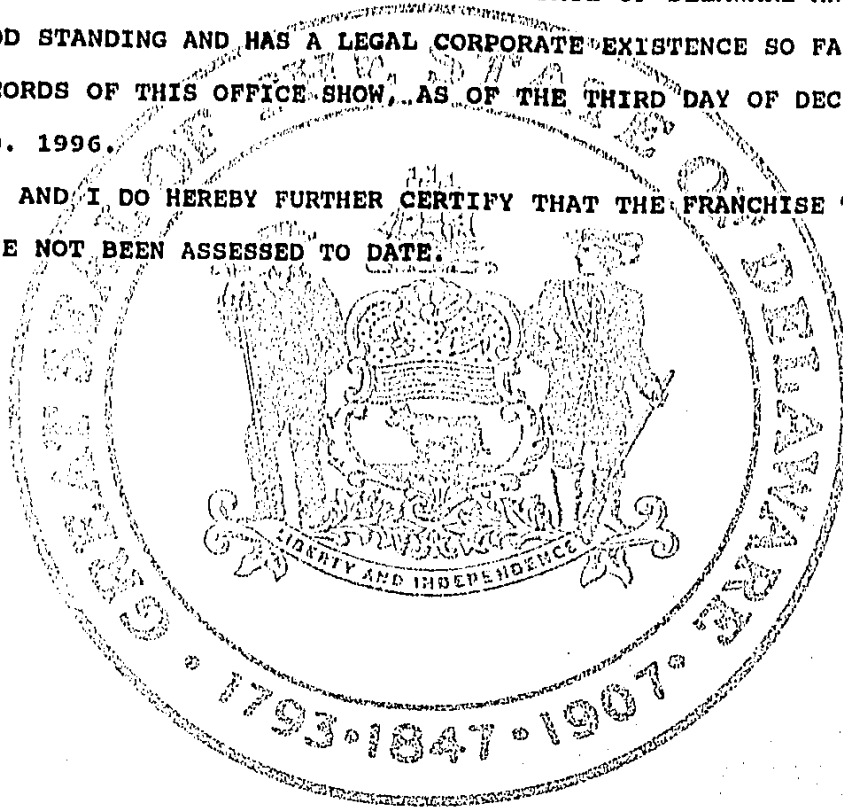
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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALS LEASING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF DECEMBER, A.D. 1996.

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



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*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION:

8219014

DATE:

12-03-96