PHONE (615) 325-3374

FAX (615) 325-3367

Florida Department of State Registration Section Division of Corporation 409 E Gaines St. Tallahassee, FL 32399

July 21, 2000

To Whom It May Concern:

Enclosed is an application for a foreign LLC with a check in the amount of \$160.00 and a Certificate of Existence from the State of Tennessee.

The check is to cover the cost of the Application, Designation of Registered Agent, Certified Copy and Certificate of Status.

Thanking you in advance.

8**00003333328--**9 -07/24/00--01096--019 *****160.00 ****160.00

Sincerely,

Sharon D. Short Business Mgr.

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: (Jurisdiction under the law of which foreign limited liability company is organized) (Duration: Year limited liability company will cease to exist or "perpetual") Work not started as of this Application (Date first transacted business in Florida. (See sections 608.501, 608.502; and 817.155, F.S.) MAiling Address 1 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Typed or printed name of signee

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 Company is:		
	Portland Utilities Construction Co. LLC		
2.	The name and the Florida street address of the registered agent and office are:		
	CT Corp Systems (Name)	90 .	
	1200 South Pine Island Rd. Florida street address (P.O. Box NOT ACCEPTABLE)	JII. 24	
	Plantaturi FL 33324		es.º
	City/State/Zip		

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 as provided for in Chapter 608, F.S..

(Signature) MARY R. ADAMS
ASSISTANT SECRETARY

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

· Secretary of State Corporations Section James K. Polk Building, Suite 1800 Nashville, Tennessee 37243-0306

ISSUANCE DATE: 07/12/2000 REQUEST NUMBER: 001942010 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/01/1996 STATUS: ACTIVE CORPORATE EXPIRATION DATE: 12/22/2025 CONTROL NUMBER: 0305017 JURISDICTION: TENNESSEE

PORTLAND UTILITIES CONSTRUCTION CO AT: SHARON SHORT PO BOX 510 PORTLAND, TN 37148

REQUESTED BY:
PORTLAND UTILITIES CONSTRUCTION CO
AT: SHARON SHORT
PO BOX 510 PORTLAND, TN 37148

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "PORTLAND UTILITIES CONSTRUCTION CO., LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID:
THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS BEEN FILED;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

PORTLAND, TN 37148-0000

PORTLAND UTILITIES CONSTRUCTON CO. P.O. BOX 510

ON DATE: 07/12/00

RECEIVED:

\$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00002710667 ACCOUNT NUMBER: 00179706

RILEY C. DARNELL SECRETARY OF STATE