MB3000001808

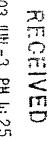
| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
| | | |
| | |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

Office Use Only



000019166340







DK



ACCOUNT NO. : 072100000032

REFERENCE

4804661

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE: May 28, 2003

ORDER TIME: 3:37 PM

ORDER NO. : 109337-005

CUSTOMER NO: 4804661

CUSTOMER: Rita Slager, Legal Assistant

Michael Best & Friedrich Llc

Suite 1900

401 North Michigan Avenue Chicago, IL 60611-4206

FOREIGN FILINGS

NAME: ASTON PM HOLDING LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 1135

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| įν | COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIG | Ν. |
|----|--|------|
| H | NITTELD LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: | |
| | | • |
| Ī | ASTON PM HOLDING LLC (Name of foreign limited liability company) | |
| | (Name of foreign furnited facility company) | |
| , | Delaware 3. | 4 |
| ٠, | Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) | , |
| | company is organized) | |
| | | |
| 4, | May 16,2003 5. Perpetual | |
| | (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") | |
| | | |
| n. | Upon filing of this application. | |
| | Upon filing of this application. (Date first transacted business in Florida. (See section) 108.501, 608.502, and 817.155, F.S.) | |
| | | |
| ٠. | 137 S. Pebble Beach Boulevard, Suite 201 | |
| | | |
| | Sun City Center, FL 33573 | |
| | (Street address of principal office) | |
| | | |
| `` | If limited liability company is a manager-managed company, check here 🗶 | |
| | | |
| ٧. | The name and usual business addresses of the managing members or managers are as follows: | |
| | | |
| | Don E. Ackerman - 137 S. Pebble Beach Blvd, Ste ZDY, Sun City Center, FL 33573 | |
| | | |
| | Alired Hoffman, Jr 137 S. Pebble Beach Blvd, Spe ZOI, Sun City Center, FL 33573 | |
| | | |
| | | |
| | | |
| | | |
| | | |
| ıί |). Attached is an original certificate of existence, no more than 90 days of the official having custody of records | ะเกา |
| ., | the jurisdiction under the law of which it is organized. (A photocopy is jot acceptable. If the certificate is in a foreign language, a | , |
| | | |
| | translation of the certificate under oath of the translator must be submitted.) | |
| | | |
| ; | Nature of business or purposes to be conducted or prompted in Florida: It will be a holding | |
| | | |
| | company. | |
| | | |
| | | |
| | 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.) | |
| | an affirmation under the penalties of perjury that the facts stated herein are true.) | |
| | Richard Hutchinson, Author Representative | |
| | Typed or printed name of signee | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 603 LIST 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:

ASTON PM HOLDING LLC

2. The name and the Florida street address of the registered agent and office are:

Richard Hutchinson
(Name)

137 S. Pabble Beach Boulevard, Ste. 201

Florida street address (P.O. Box 10T ACCEPTABLE)

Sun City Center FL 33573
(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. Thereby 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)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASTON PM HOLDING 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-EIGHTH DAY OF MAY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASTON PM HOLDING LLC" WAS FORMED ON THE SIXTEENTH DAY OF MAY, A.D. 2003.

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



Varriet Smith Windsor, Secretary of State

AUTHENTICATION: 2439675

DATE: 05-28-03

3659529 8300

030347151