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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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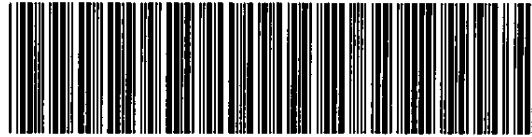
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2007

BRETT M. DALE
1755 S. NAPERVILLE RD #200
WHEATON, IL 60187

SUBJECT: INDIAN HILL GROUP, L.P.

We have received your document for INDIAN HILL GROUP, L.P. and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 607A00032394

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. Indian Hill Group, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Delaware

(State or Country of Formation)

3. September 1, 1999

(Date of Formation)

4. CT Corporation System

(Name of Registered Agent for Service of Process)

5. 1200 S. Pine Island Road

(Florida street address for Registered Agent)

Plantation, Florida 33324

6. 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.

Sarah B. Ayala

Signature of Registered Agent

Sarah B. Ayala
Assistant Secretary

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7. 3179 Lancaster Drive, Naples, Florida 34105

(Principal office address)

8. If limited partnership is a limited liability limited partnership, check box ☐

9. 3179 Lancaster Drive, Naples, Florida 34105

(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

William T. Novak

(Name)

3179 Lancaster Drive

(Street Address)

Naples, Florida 34105

same

(Mailing Address)

David A. Novak

(Name)

77 Braddock Way

(Street Address)

Ashville, NC 28704

same

(Mailing Address)

Susan J. Novak

(Name)

1307 Dogwood Lane

(Street Address)

Raleigh, NC 27607

same

(Mailing Address)

Ann Novak Russell

(Name)

1231 Boswell Lane

(Street Address)

Naperville, IL 60564

same

(Mailing Address)

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Michael T. Novak

(Name)

6520 Valley Drive

(Street Address)

Falls Church, VA 22042

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

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TALLAHASSEE, FLORIDA

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

Signed this 17th day of May, 2007.

Signature of a general partner:

W. T. Novak

William T. Novak, General Partner

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INDIAN HILL GROUP, L.P." 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-THIRD DAY OF MAY, A.D. 2007.



3091645 8300

070603670

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5698439

DATE: 05-23-07