

CORPORATION(S) NAME		
Bracknell Georgia GP, Inc.		
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		-
() Profit	() Amendment	() Monoson
() Nonprofit	() Amendment	() Merger
(x) Foreign	() Dissolution/Withdrawal	() Mark
	() Reinstatement	() Other () Change of RA () UCC
() Limited Partnership	() Annual Report	() Other
()LLC	() Name Registration	() Change of RA \approx SF \approx
() G .: C 1.0	() Fictitious Name	() UCC S S
() Certified Copy	() Photocopies	() cus
() Call When Ready	() Call If Problem	() After 4:30 (x) Pick Up
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out		<u> </u>
, 37	0/10/01	
Name	9/10/01	Order#: 4777933
Availability Document		7000045781971 -03/10/0101083034
Examiner		Ref#: ******70.00 ******70.00
Updater	•	NCI#.
Verifier		-
W.P. Verifier	•	Amount: \$

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615



18

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	PREIGN CORPORATION TO TRANSA	•	る歌 万 岩		
	GEORGIA GP, INC.		THE SERVICE OF THE SE		
words or abbre	ration; must include the word "INCORPC viations of like import in language as will our partnership if not so contained in the national contained in the nation of the contained in the contained	ORATED", "COMPANY", "CORPORATION" or clearly indicate that it is a corporation instead of a ame at present.)	10 PM 2: 27		
Georgia		3. 58-2632293			
(State or count	ry under the law of which it is incorporate	ed) (FEI number, if applicable)			
06/22/2001		5. Perpetual	erpetual		
(Da	te of incorporation)	(Duration: Year corp. will cease to exist or	"perpetual")		
Upon Qualifica					
Date first trans	acted business in Florida. If corporation h (SEE SECTIONS 607	has not transacted business in Florida, insert "upon q 7.1501, 607.1502 and 817.155, F.S.)	ualification.")		
121 South 8th	Street, Minneapolis, MN 55402				
	(Principal office	ce address)	•		
same					
	(Current mailir	ng address)			
Employ people of Inglett & St		l act as general partner of the partnership that is the s	sole member		
		te or country to be carried out in state of Florida)			
Name and <u>st</u>	reet address of Florida registered ag	gent: (P.O. Box or Mail Drop Box NOT accep	otable)		
Name:	C T Corporation System	······································	a sea a		
	1200 South Pine Island Road	· · · · · · · · · · · · · · · · · · ·			
fice Address:					
fice Address:	Plantation	, Florida <u>33324</u>			
ffice Address:		, Florida <u>33324</u> (Zip code)			
aving been na signated in th rther agree to	Plantation (City) agent's acceptance: med as registered agent and to accept is application, I hereby accept the application of all states.		t in this capacity		
). Registered aving been na ssignated in th rther agree to	Plantation (City) agent's acceptance: med as registered agent and to accept is application, I hereby accept the application, and the provisions of all states familiar with and accept the obligate	(Zip code) of service of process for the above stated corporations as registered agent and agree to actuates relative to the proper and complete perfo	t in this capacity		

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:

A. DIRECTORS			
Chairman: SEE ATTACHMENT			4.0
Address:			PEG S TI
			200
Vice Chairman:			SEE
			TEST 2
Address:	· · · · · · · · · · · · · · · · · · ·	.,	27
Director:			
Address:			
			·
Director:			
Address:		· · · · · · · · · · · · · · · · · · ·	
B. OFFICERS			
President: SEE ATTACHMENT		·	
Address:			
			r
Vice President:			
Address:			· · · · · · · · · · · · · · · · · · ·
			. <u>3</u> n - T.
Secretary:			<u> </u>
Address:			. ,
Treasurer:			
Address:			
NOTE: If necessary, you may attach an a	ddendum to the application	n listing additional officers	and/or directors.
13. MCMZ	7 01	cer listed in number 12 of t	
*	vice Chairman, or any office	cer usted in number 12 of t	не аррисацоп)
14. John McMahon, Secretary (Typed or printed)	name and canacity of pers	son signing application)	

Rider for Bracknell Georgia GP. Inc. Officer/Director Information

Frederick C. Green IV: President and Director

Business address:

121 South 8th Street

Minneapolis, MN 55402

John McMahon: Secretary and Director

Business address:

121 South 8th Street

Minneapolis, MN 55402



Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CT CORPORATION SYSTEM
JAMIE SGUBIN
1201 PEACHTREE STREET, N.E.
ATLANTA, GA 30361

CONTROL NUMBER : 0128385
DATE INC/AUTH/FILED: 06/22/2001
JURISDICTION : GEORGIA
PRINT DATE : 09/07/2001

FORM NUMBER : 211



CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do-hereby certify under the seal of my office that as of the above print date

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the junisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of Cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20010907162313353



Cathy Cox Secretary of State