

ACCOUNT NO. :

072100000032

REFERENCE :

466651

4346554

AUTHORIZATION

COST LIMIT

\$ 78.75

ORDER DATE: November 16, 2001

ORDER TIME : 4:04 PM

900004688719-

ORDER NO. : 466651-005

CUSTOMER NO:

4346554

CUSTOMER: Alex F. Delvecchio, Esq Babst Calland Clements & Two Gateway Center, 8th Flr.

Pittsburgh, PA 15222

FOREIGN FILINGS

PEAK LIME, INC.

********FTLE 1ST***********

BK

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Darlene Ward

-- EXT# 1135

EXAMINER:

TRANSMITTAL LETTER						
TO: Registration Section Division of Corporations						
SUBJECT: Peak Lime, Inc.						
(Name of corporation - must include suffix)						
Dear Sir or Madam:						
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.						
Please return all correspondence concerning this matter to the following:						
Alex F. DelVecchio, Esquire						
(Name of Person)						
Babst, Calland, Clements and Zomnir, P.C.						
(Firm/Company)						
Two Gateway Center, 8th Floor						
(Address)						
Pittsburgh, PA 15222						
(City/State and Zip code)						
For further information concerning this matter, please call:						
WATTALL OF TAX						
William Sichko at (913) 227-0584 (Name of Person) (Area Code & Daytime Telephone Number)						
(Name of Person) (Area Code & Daytime Telephone Number)						
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314						
Enclosed is a check for the following amount:						
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status & Certified Copy						

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

EGISTER A FOI	REIGN CORPORATION TO TRANSAC	4 SZ CT E	ED", "COMPANY", "CORPORATION" of A CORPORATION OF A CORPO	ń
Peak Lime,	Inc.	A CITE	"COMPANY" "CORPORATION" of the	
words or abbrevi	ation; must include the word "INCORPOR intions of like import in language as will clear partnership if not so contained in the name	early e at	present.)	
Delaware		_ 3.	Applied for	
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)	
10/12/2001		5.	Perpetual	:
(Date	e of incorporation)	7	(Duration: Year corp. will cease to exist or "perpetual")	
Upon qualif	Eication			
(Date first transa	cted business in Florida. If corporation has	s no 1501	transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)	
15700 Colle	ege Boulevard, Suite 101			
· · · · · · · · · · · · · · · · · · ·	(Principal office	ado	ress)	'
Lenexa, KS	66219			_
of Florida Purpose	(s) of corporation authorized in home state	or c	permitted under the laws of the State ountry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptable)	<u>.</u>
Name:	Corporation Service Company			
Office Address:	1201 Hays Street			
	Tallahassee		, Florida 32301	
	(City)		(Zip code)	
Having been na designated in th further agree to	is application, I hereby accept the app comply with the provisions of all state familiar with and accept the obligation	oin utes ons	vice of process for the above stated corporation at the tment as registered agent and agree to act in this cap relative to the proper and complete performance of my position as registered agent. COURTNEY, ASST. V.P.	ucuy.
~	(Registered age	-	- · · · · ·	
			d not more than 90 days prior to delivery of this appli	aatia

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.

2 12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ____ Address: ___ Vice Chairman: Address: Director: Michael R. Boyce, Sole Director Address: 15700 College Boulevard, Suite 101 Lenexa, KS 66219 **B. OFFICERS** President: Michael R. Boyce Address: 15700 College Boulevard, Suite 101 Lenexa, KS 66219 Vice President: Address: __ Secretary: William Sichko Address: 15700 College Boulevard, Suite 101, Lenexa, KS 66219 Treasurer: Scott Randolph Address: 15700 College Boulevard, Suite 101, Lenexa, KS 66219 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William Sichko, Secretary and Chief Administrative Officer

(Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PEAK LIME, 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 FIFTEENTH DAY OF NOVEMBER, A.D. 2001.

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

Darriet Smith Windson, Secretary of State

AUTHENTICATION: 1449362

3445621 8300

010580083

DATE: 11-15-01