F0200000418

TRANSMITTAL LETTER

TO: Registration Sec Division of Corp				-			-
SUBJECT:	Life A	lssoci at	es Inc.		_		
Зоваест.	(Name	of corporation	- must include s	suffix)			
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Dear Sir or Madam:		, ,	£.		-09/14/01- ******70.0		300 70.00
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Please return all corresp	ondence concernii	ng this matter	to the following:	:			
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	<u> </u>	(Name of	Person)			• • , • .	•
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For further information	concerning this m	atter, please c	all:		****650.00	} ****B5	3.00
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STREET ADDRESS:		-	MAILING AD	-			
Registration Section	_		Registration Se Division of Co				
Division of Corporation 409 E. Gaines St.	ıs		P.O. Box 6327		<u>}</u>	>>	
Tallahassee, FL 32399		-	Tallahassee, FI		25号	<u>_</u>	
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Enclosed is a check for	the following amo	ount:				25	
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\$70.00 Filing Fee	□ \$78.75 Filing	-	\$78.75 Filing F		\$87.50-Filing Certificate o		
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mta 1/25 *, 1 j*



Department of State

Memorandum Office of the General Counsel

TO:

File

FROM:

Gerard York, Assistant General Counsel

DATE:

January 14, 2002

RE:

Life Associates, Inc.

Based on my review of the file and the payments received from the corporation, it is my recommendation that this file be closed. Corporation has paid outstanding report fees from 2000 of \$150.00 and foreign non-qualified penalties from 2000 of \$500.00 assessed at the statutory minimum of \$500.00 per year. Corporation wishes to be qualified to transact business in Florida. Accordingly, it is recommended this corporation be issued a certificate of authority.

/gty

PILED 02 JAN 25 PH II: 2: Secretary of State



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 18, 2001

DANO LO PRESTI PO BOX 111 SANDWICH, IL 60548

SUBJECT: LIFE ASSOCIATES, INC. Ref. Number: W01000021590

We have received your document for LIFE ASSOCIATES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the street address of each officer/director.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To

adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 801A00052162

SECRETARY OF STATE
TALL MINSSIE FLOORS



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 16, 2001

DANO LO PRESTI PO BOX 111 SANDWICH, IL 60548

SUBJECT: LIFE ASSOCIATES, INC. Ref. Number: W01000021590

We have received your document for LIFE ASSOCIATES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name you have adopted LA, Inc. is also not avaliable so therfore you would need to adopt an alternate name.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Floridal Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation begane transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

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

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 601A00057127



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 1, 2001

DANO LO PRESTI PO BOX 111 SANDWICH, IL 60548

SUBJECT: LIFE ASSOCIATES, INC. Ref. Number: W01000021590

We have received your document for LIFE ASSOCIATES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You may add any word to the end of the name to make a differnce but Florida they will not allow Of Florida to make a differnece it is considered the same. Also please address the two other problems in the letter.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been all this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$You may add any word to the end of the name to make a difference but Florida they will not allow Of Florida to make a difference it is so considered t.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the

English language. A photocopy of this certificate is not acceptable.

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

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 401A00059691

D2 JAN 25 PH II:
SECRETARY OF STAT

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned LORI ZACH	MAUGU/ Name)		_, do hereby o	ertify	
that this Resolution of the Board of Directors of			TES, I	M.	
(Corp	porate Name)	· <u> </u>		_zn	
U_{ij}	Corporate	Name) , hereb	by adopts the	, O2 J	-

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	Life Associates Inc.
	(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2.	Tilinots 30-2062806 State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	2000
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7.	1743 Wright Drive Sandwich IL 60548
_	(Principal office address)
	1743 Wright Drive, Sandwich, IL 60548 (Principal office address) P.O. Box III Sandwich, IL 60548 (Current mailing address)
_	(Current mailing address)
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: Name: DANO LO PRESTE
Ofi	Fice Address: 275 S. Patrick Dr. Suite K Satellite Beach, Florida 32937 (City) (Zip code)
	Satellite Brack Florida 32937
	(City) (Zip code)
	Registered agent's acceptance:
Ha	ving been named as registered agent and to accept service of process for the above stated corporation at the place
des fur	ignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I ther agree to comply with the provisions of all statutes relative to the proper and complete performance of my
dut	ies, and I am familiar with and accept the obligations of my position as registered agent.
	Sog. 26 (Amenso
	Registered agent's signature)

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:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	· · · · · · · · · · · · · · · · · · ·
Director:	
Address:	
B. OFFICERS	
President: 2011 2aci Many	-i O
President: Lori Zach mann Address: 1743 Wright Drive Sandwich, IL 6059	SECI
Sardwich, IL 60548	
Vice President:	
Address:	
	LOSTA III:
Secretary: LORE ZACH MANIN	29 10 10 10 10 10
Address: 1743 Wright Drive	
· · · · · · · · · · · · · · · · · · ·	
, –	
Address:	
NOTE: If necessary, you may attach an addendum to the application listin	a additional officers and/or directors
13. (Signature of Chairman, Vice Chairman, or any officer lists	ed in number 12 of the application)
14. LUCI L. LA CHMANN (Typed or printed name and capacity of person sign	aing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do

FILED

**JAN 25 PM II: 29

**RETARY OF STATE
**AIIASSEE, FLORIDA



In Testimony Whereof, I, hereto set

Desse White