# F02000001793

### MASUDA FUNAI EIFERT & MITCHELL

Attorneys at Law

DENISE H. YAMAGIWA LEGAL ASSISTANT CHICAGO OFFICE

April 4, 2002

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Masuda, Funai, Eifert & Mitchell, Ltd.

One East Wacker Drive, Suite 3200 Chicago, Illinois 60601-2002 312 245 7500 tel 312 245 7467 fax

Two Continental Towers 1701 Golf Road, Suite 800 Rolling Meadows, Illinois 60008-4254 847 734 8811 tel 847 734 1089 fax www.masudafunai.com

312 Wainut Street, Suite 1750 Cincinnati, Ohio 45202-4021 513 381 5552 tel 513 381 5559 fax

19191 South Vermont Avenue Suite 420 Torrance, California 90502-1051 310 323 8500 tel 310 323 6446 fax

400005223854--6 -04/09/02--01084--016 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

Re: Application for Certificate of Authority Robert H. Meier & Associates, Inc.

Dear Sir or Madam:

Please issue a Certificate of Authority to the above-named corporation. Enclosed herewith are the following documents:

- 1. Transmittal Letter;
- 2. Application for Certificate of Authority, in duplicate;
- 3. Certificate of Good Standing issued by the Secretary of State of Illinois dated April 3, 2002; and
- 4. A check in the amount of \$70.00 for the registration fee and acknowledgement letter.

Your early consideration of this filing is much appreciated. If you have any questions or problems with processing the above request, please call the undersigned <u>immediately</u> by calling collect at (312) 245-7479.

Thank you for your attention to this matter.

Very truly yours,

MASUDA, FUNAI, EIFERT & MITCHELL, LTD.

Denise H. Yamagiwa Legal Assistant

Legal Assistar Enclosures 2002 APR -9 PM 1: 44
DIVILION OF CORPORATION
FALLAHASSEE, FLORIDA

1 BOYAN APR 1 1:2002

#### TRANSMITTAL LETTER

| TO: Registration Section  |   |   |  | 1:4 |
|---|---|---|--|-----|
| Division of Corporat  | ions  |   | (A)  | F   |
| SUBJECT:  | ROBERT H. MEI                               | ER & ASSOCIATES, INC  | <u>.                                    </u>                       | 35  |
|   | (Name of corpo                              | ration - must include suffix)   |  |     |
| Dear Sir or Madam:  |   | -   |  |     |
| The enclosed "Application b "Certificate of Existence", ar to transact business in Florid             | nd check are submitted                      | for Authorization to Transa<br>to register the above referen                                    | nct Business in Florida",<br>nced foreign corporation              |     |
| Please return all corresponde   | nce concerning this m                       | atter to the following:   |  |     |
| Gerald L. Morel, Esq.   |   | <del></del>   |  | •   |
|   | (Nam  | e of Person)  |  |     |
| Masuda, Funai, Eifert   | & Mitchell, Ltd                             |   |  |     |
| •   | (Firm                                       | /Company)   |  |     |
| One East Wacker Drive   | , Suite 3200                                |   |  |     |
|   | (A  | Address)  |  | . , |
| Chicago, IL 60601-20  | 02  | · <u>-</u>  |  |     |
|   |   | ate and Zip code)   | ·  |     |
|   |   |   |  |     |
| For further information conce   | erning this matter, plea                    | se call:  |  |     |
|   |   |   |  |     |
| Gerald L. Morel, Esq.   | at (3:                                      | 22 ) 245-7500<br>rea Code & Daytime Telepho   |  |     |
| (Name of Person)  | (Aı   | ea Code & Daytime Telepho   | one Number)  |     |
|   |   |   |  |     |
| STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 | en e    | MAILING ADDRESS Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314 | ons  |     |
| Enclosed is a check for the fo  | llowing amount:                             |   |  |     |
|   | 78.75 Filing Fee &<br>Certificate of Status | \$78.75 Filing Fee & Certified Copy   | □ \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy | &   |

## 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.

| Ι.            | ROBERT H. MEIER & ASSOCIATES,   |   |
|---------------|---|---|
|               | (Name of corporation; must include the word "INCORPORAT words or abbreviations of like import in language as will clearl natural person or partnership if not so contained in the name at | rly indicate that it is a corporation instead of a  |
| 2.            | Illinois 3.   | 36-3116472  |
|               | (State or country under the law of which it is incorporated)  | (FEI number, if applicable)   |
| 4.            | January 12, 1981 5.   | Perpetual SSS 2 0   |
|               | (Date of incorporation)   | (Duration: Year corp. will cease to exist or "perperual")   |
| 6.            |   |   |
|               | (Date first transacted business in Florida. If corporation has no (SEE SECTIONS 607.150)  | ot transacted business in Florida, insert "upon qualification of the property |
| 7.            | 444 Brickell, Suite 721   |   |
|               | (Principal office add   | ldress)   |
|               | Miami, Florida 33131  |   |
|               | (Current mailing add  | ,   |
| 8.            | Money & investment management and providing advisory services   | ing investment research, analysis &   |
|               | (Purpose(s) of corporation authorized in home state or co   | country to be carried out in state of Florida)  |
| 9.            | Name and street address of Florida registered agent:  | : (P.O. Box or Mail Drop Box NOT acceptable)  |
|               | Name: Robert H. Meier   |   |
| 0             | ffice Address: 444 Brickell, Suite 721  |   |
|               | Miami   | , Florida33131  |
|               | (City)  | (Zip code)  |
| H<br>de<br>fu | esignated in this application, I hereby accept the appoint  | rvice of process for the above stated corporation at the place atment as registered agent and agree to act in this capacity. It is relative to the proper and complete performance of my so of my position as registered agent.   |

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.

Robert H. Meier (Registered agent's signature)

#### 12. Names and business addresses of officers and/or directors:

| \ddress: _       | 444 Brickell, Suite 721, Miami, Florida 33131   |
|------------------|---|
| -<br>ice Chair   | nan:  |
|                  | PO TE   |
| <br>_ Director:  | SEE PO  |
| .ddress: _       | REAL PROPERTY OF THE PROPERTY |
| -<br>- Director: |   |
| .ddress: _       |   |
| . OFFI           |   |
|                  | Robert H. Meier  444 Brickell, Suite 721  |
|                  | Miami, Florida 33131  |
| ice Presid       | nt;   |
| .ddress: _       |   |
| ecretary:        | Robert H. Meier   |
|                  | 444 Brickell, Suite 721, Miami, Florida 33131   |
|                  | Robert H. Meier   |
|                  | necessary you may attach an addendum to the application listing additional officers and/or directors.   |
| 3                | Hotel V. Miller   |
|                  | (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)   |



## To all to whom these Presents Shall Come, Greeting:

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



## In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this \_\_\_\_\_\_\_ A.D. \_\_\_\_\_\_.

Desse White