ACCOUNT NUMBER: REFERENCE: (Sub Account) 6-24-02 DATE: Lexis Document REQUESTOR HAME: ADDRESS: 100005833001 TELEPHONE: CONTACT NAME: Blackhawk CCV CORPORATION NAME: DOCUMENT NUMBER: (if applicable) CERTIFIED COPY (1-9)
CERTIFICATE OF STATUS (1-9) PLAIN STAMPED COPY

() Call When Ready () Call if Problem () Walk In () Will Wait

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Short Or

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	BLACKHAWK CCV, INC.							
words or abbre	eration; must include the word "INCORPOR viations of like import in language as will cloor partnership if not so contained in the name	early	ED", "COMPANY", "CORPORATION" or y indicate that it is a corporation instead of a present.)					
2. I	llinois	3.						
(State or country	under the law of which it is incorporated)	•	(FEI number, if applicable)	-,				
4	7-18-02	5.	Perpetual					
(Dat	e of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	•				
6Upon o	qualification							
(Date first transa	acted business in Florida. If corporation has (SEE SECTIONS 607.1	not 501	transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)					
7. 100 N. LaSalle St., Suite 910, Chicago, IL 60602								
	(Principal office	addı	ress) 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
(Current mailing address)								
8. Investment in an Illinois partnership (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)								
(Purpose	(s) of corporation authorized in home state of	r co	ountry to be carried out in state of Florida)	•				
9. Name and str			(P.O. Box or Mail Drop Box NOT acceptable)					
Name:	Lexis Nexis Document S	sol	lutions Inc. F0100003179					
Office Address	3953 W. W. Kelley Road	1 .						
•	Tallahassee		, Florida 32311 (Zip code)					
	(City)		(Zip code)					
Having been nar designated in thi further agree to	s application, I hereby accept the appo	intn tes r	ice of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my of my position as registered agent.					
	Lexis Nexis Document S	sol	lutions (Inc.//)ordinal					

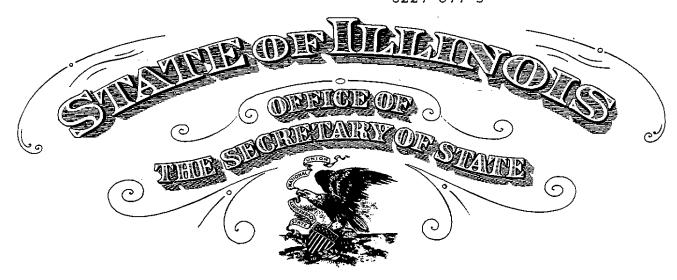
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

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

A. DIKE				
Chairman:	Not Applicable			> =
Address: _			_	
_				
Vice Chain	man: Not Applicable		-	<u> </u>
Address: _			<u></u>	
_ Director: _	Gary S. Richman	<u> </u>		<u></u> .
_	100 N. LaSalle Street, Suite 910			
Address	Chicago, IL 60602	-		
Director: _				
Address: _	· · · · · · · · · · · · · · · · · ·			
_		-		
B. OFFI	CERS		10 July 20	**************************************
President:	Gary S. Richman	7.3	:≅z <u>r\v_</u>	
Address: _	100 N. LaSalle Street, Suite 910	SEY.		
_	Chicago, IL 60602	크ơ 크로	7,3	<u></u>
Vice Presid	lent: Not Applicable		37	
Address: _				· :
_				
Secretary:	Gary S. Richman			<u>. </u>
Address: _	100 N. LaSalle Street, Suite 910, Chicago, IL 60602			
Гтеаsurer:	Not Applicable			<u></u> :
Address: _		÷.	.,	
VOTE: H	f necessary, you may attach an addendum to the application listing additional officers and/or d	inaatana		
13		nectors.		
<u>.</u>	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applications)	ation)		 : ==
14. <u> </u>	ary S. Richman, President			
	(Typed or printed name and capacity of person signing application)			

File Number



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of ______ A.D. _______

Desse White

SECRETARY OF STATE