# F03000004649

(Requestor's Name)
(Address)
(Address)
(1821-1825)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(South of Author)
0.25.40
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



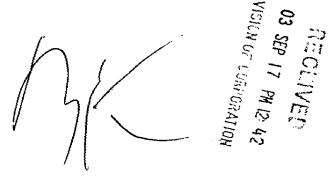


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	ACCOUNT NO. : 07210000003	32 23
	REFERENCE : 243875	43273 智 五
	AUTHORIZATION : Patinia I	2 To
	COST LIMIT : \$ 78.75	是是
		22 22
ORDER DATE	: September 16, 2003	<b>5 5</b>
ORDER TIME	: 10:23 AM	
ORDER NO.	: 243875-005	
CUSTOMER NO	0: 4327389	· ·
CUSTOMER:	Ms. Shirley Jantz	
	Isaacson, Rosenbaum, Woods & Suite 2200	
	633 17th Street Denver, CO 80202	
	FOREIGN FILINGS	<del></del>
NAME	E: MG-FS OPERATING, INC.	
XXXX QUALI	IFICATION (TYPE: <u>CO</u> )	. <del></del>
PLEASE RETU	ORN THE FOLLOWING AS PROOF OF FILIN	<u>-</u> I <b>G</b> :
CEL	RTIFIED COPY	
PLA	AIN STAMPED COPY	
XXCEF	RTIFICATE OF GOOD STANDING	<del></del> ·
CONTACT PER	RSON: Amanda Haddan EXT# 1155	
	EXAMINER:	

## 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.

I. MG-FS O	perating, Inc.	- a			
words or abbrev	ration; must include the word "INCORPORATED iations of like import in language as will clearly in	idicate that it is	", "CORPORA a corporation i	TION or Constead of a	A T
naturai person o	r partnership if not so contained in the name at pre	esent.)			6 F.
2. Colorado	3.	20-02197	93 .		- [
(State or country	under the law of which it is incorporated)		EI number, if a	pplicable)	3
4. <u>Septembe</u>		Perpetual			جي پي
·		Duration: Year	corp, will ceas	e to exist or "perr	retual")
	Lification cted business in Florida. If corporation has not tra		Arrana.	<u> </u>	
(Date that transa	(SEE SECTIONS 607.1501, 6			sert "upon qualih	cation.")
7. 4643 Sout	th Ulster Street, Suite 1500, De	nver, CO	80237		-
	(Principal office address	s)			·
4643 Sou	th Ulster Street, Suite 1500, De		30237	· · · ·	<u>.                                    </u>
	(Current mailing addres	s)			
•••					
	perations	، سن <u>ه</u> ه	<u>₹.</u> →	+ K 4 F 3	* * *
	operations s) of corporation authorized in home state or coun	try to be carried	out in state of	Florida)	
(Purpose(					3)
(Purpose(	s) of corporation authorized in home state or coun				e)
(Purpose(  9. Name and str  Name:	s) of corporation authorized in home state or councet address of Florida registered agent: (P				e) 
(Purpose(  9. Name and str  Name:	s) of corporation authorized in home state or councet address of Florida registered agent: (P  Corporation Service Company  1201 Hays Street	O. Box or M	ail Drop Box		s) 
(Purpose(  9. Name and str  Name:	s) of corporation authorized in home state or councet address of Florida registered agent: (P  Corporation Service Company  1201 Hays Street	O. Box or M	ail Drop Box		e)
(Purpose)  9. Name and str  Name:  Office Address:  10. Registered a Having been name designated in this further agree to duties, and I am	s) of corporation authorized in home state or councet address of Florida registered agent: (P  Corporation Service Company  1201 Hays Street  Tallahassee	O. Box or Manager of process for the process for the process of th	32301 (Zip code)  r the above sted agent and components	NOT acceptable  ated corporation agree to act in the	n at the place his capacity. I

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

FL019 - 12/17/02 C T System Online

under the law of which it is incorporated.

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

A. DIRECTORS	
Chairman: See attached officers/directors rider	
Address:	
	4503
Vice Chairman:	SE TI
Address:	
	2
Director:	22.2
Address:	
Director:	
Address:	
B. OFFICERS	<del></del>
President: See attached officers/directors rider	<del> </del>
Address:	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	<u> </u>
Address:	
NOTE: If necessary, you may attach an addendum to the application listing	
13.	gleman, Vice President/Secretary
(Signature of Chairman, Vice Chairman, or any officer lis	ted in number 12 of the application)
John G. Spiegleman, Vice President/Secretary  (Typed or printed name and capacity of person signals)	oning application)
(1) pot or printed name and capacity of person sig	D D L L

# MG-FS OPERATING, INC. (a Colorado corporation)

### ADDENDUM

### DIRECTORS:

Address
4643 South Utster, Stilte 1500
Denver, CO 80237
4643 South Ulster, Suite 1500
Denver, CO 80237
4643 South Ulster, Suite 1600
Denver, CO 80237

#### **OFFICERS:**

Name	<u>Title</u>	Address
James H. Miller	President	4643 South Ulster, Suite 1500 Denver, CO 80237
Donald E. Spiegleman `	Vice President	4643 South Ulster, Suite 1500 Denver, CO 80237
David T. Johnstone	Vice President/Treasurer	4643 South Ulster, Suite 1500 Denver, CO 80237
John G. Spiegleman	Vice President/Secretary	4643 South Ulster, Suite 1500 Denver, CO 80237



# STATE OF COLORADO

## DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

MG-FS OPERATING, INC. (Colorado CORPORATION )
File # 20031294767



was filed in this office on September 12, 2003 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: September 12, 2003

#### For Validation:

Certificate ID: 704787

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

Secretary of STATE