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Reinstatement

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May 18, 2004

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| NEW FILINGS | | AMENDMENTS | |
| Profit | | Amendment | |
| Non Profit | | Resignation of RA Officer/Director | SEL SEL |
| Limited Liability | | Change of Registered Agent | ALLAHASSEE TOORIO |
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| OTHER FILINGS | | REGISTRATION/QUALIFICATION | 7. |
| Annual Reports | Х | Foreign | |
| Fictitious Name | | Limited Liability | |

Reinstatement

Trademark

Other

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.

| | | | | | 61. | | 5 er. | |
|-----------------------|-------------------|-----------------------|--|--|---------------------------------------|---------------------------------------|---|-------------|
| (If name unava | ilable in Flor | ida, enter alternate | corporate name | adopted for the purp | ose of transact | ing business in | Florida) | |
| 2. Illinois | | | | 36-3563834 | · · · · · · · · · · · · · · · · · · · | | | |
| (State or countr | y under the la | aw of which it is inc | corporated) | (FE. | I number, if ap | plicable) | | |
| 4. January 15 | 5, 19 <u>88</u> . | | 5. | perpetual | | · · · · · · · · · · · · · · · · · · · | | |
| (Da | te of incorpo | ration) | | (Duration: Year co | orp. will cease | to exist or "per | petual") | |
| 6. <u>Upon quali</u> | fication | | | - | | . N | | * - 4. |
| | | ss in Florida. If cor | poration has no | t transacted business , 607.1502 and 817. | | ert "upon qualit | fication.") | |
| 7,14000 soutl | n Keeler . | Avenue | | · · | <u> </u> | . men i je | | |
| | | | cipal office add | ress) | | | | |
| Crestwood, | Tr. 60445 | , | | | | | | <u> </u> |
| <u> </u> | ID VORTO | (Curr | ent mailing add | iress) | <u></u> | | | - ¥ |
| | | | | | | | | |
| 8. General co | ntracting | 3. | | | | | | 4. |
| | | | home state or co | ountry to be carried o | out in state of F | lorida) | | |
| 9. Name and <u>st</u> | reet addres | s of Florida regis | tered agent: | (P.O. Box or Mail | Drop Box <u>N</u> C | OT acceptable | FH 2 | |
| Name: | Corporat | ion Service C | ompany | · · · · · · · · · · · · · · · · · · · | | 1 | OF HAY | an-yeng |
| Office Address: | 1201 Hay | /s Street | | <u>্র্কেন্</u> কেন্ | | · · · · · · · · · · · · · · · · · · · | SE G | == |
| | m-15-2 | | | ' Pt - 51 - 202 | .0.5 | | | 95 |
| | Tallanas | (City) | <u>i kalendar di karangan di</u> | , Florida <u>323</u> (2 | Zip code) | | 7 N N N N N N N N N N N N N N N N N N N | _ |
| | | () | | | | | == ro | |

(Registered agent's signature)
Vera Norris, Authorized Representative

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:

Corporation Service Company

| A. DIR | ECTORS | ŧ | | | | | | | |
|----------------|---|--------------|-------------|-------------|-------------|---|---------------|--|-----------------|
| Chairman | | <u> </u> | | <u>,</u> | | | - j- | , ÷ | - . |
| Address: | *** | | <u> </u> | | <u></u> | · <u> </u> | <u> </u> | <u>: </u> | <u>-</u> - |
| | <u> </u> | | | | | | <u></u> | | - |
| Vice Cha | irman: | | | | · | - | | | <u>-</u> · |
| Address: | | | | | | | | | - |
| Director: | Kathy J. Healy | | | | | | <u> </u> | | |
| | 14000 South Keeler Avenue | | | | | | | | |
| | Crestwood, IL 60445 | • | | | | | | | |
| | | | | | | | | | |
| Address: | | | | | | | | | |
| B. OFF | ICERS | | | | | | | | - -, |
| • | •• | | | · | | | | | <u>-</u> |
| | Crestwood, IL 60445 | | | | | | | . /4.9 | _ |
| Vice Pres | ident: James D. Healy | | <u>,</u> | | | | | 0 | |
| Address: | 14000 South Keeler Avenue | | | | | | -4- | * | _ - |
| | Crestwood, IL 60445 | | **** | <u></u> | 1 | - v | ASS. | <u> </u> | = |
| Secretary | : Kathy J. Healy | | · | : | | · | 45 | 70 | <u>=</u> |
| Address: | 14000 South Keeler Avenue, Cre | estwood, | IL 6044 | 5 | | | | _ . | - |
| Treasurer | : Kathy J. Healy | | | | 2081.26. 6. | . · . : = = = = = = = = = = = = = = = = = = | تر. . برد. | . 10 | حفر س |
| Address: | 14000 South Keeler Avenue, Cre | estwood. | IL 6044 | 5 | | <u></u> | | | _ |
| NOTE: | If necessary, you may attach an addendu | ım to the ap | plication l | isting ad | ditional of | ficers and/ | or directors. | | |
| 13 | Kathy J. Healy | | | | | | | | - . |
| | | listed in nu | mber 12 o | f the app | lication) | | | | |
| 14. <u>Kat</u> | hy J. Healy, President (Typed or printed name a | and canacity | v of persor | signing | annlicatio | n) | _ | <u> </u> | <u>.</u> |
| | (-) t trustee viette o | | , 2 | | | / | | | |



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

12TH

day of

MAY

A.D.

2004

Desse White