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Florida Department of State  
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DIVISION OF CORPORATION

## FOREIGN PROFIT QUALIFICATION

Inland Continental Property Management Corp.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

STATE  
TALLAHASSEE, FLORIDA

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**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. Inland Continental Property Management Corp.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. Delaware**

(State or country under the law of which it is incorporated)

**3. 20-1659091**

(FEI number, if applicable)

**4. September 15, 2004**

(Date of incorporation)

**5. perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6. upon filing**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 2901 Butterfield Road, Oak Brook, IL 60523**

(Principal office address)

**2901 Butterfield Road, Oak Brook, IL 60523, Attn: Law Department**

(Current mailing address)

**8. management of commercial real estate**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

**9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**

Name: **C T Corporation System**

Office Address: **1200 South Pine Island Road**

**Plantation**, Florida **33324**

(City)

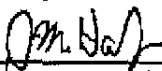
(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

C T Corporation System

By:



**James M. Halpin**

(Registered agent's signature) Assistant Secretary

**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:**

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**A. DIRECTORS**

Chairman: Thomas P. McGuinness

Address: 2901 Butterfield Road, Oak Brook, IL 60523

Vice Chairman: None

Address: \_\_\_\_\_

Director: Robert M. Barg, Alan F. Kremin, Angela Norton and Frances C. Panico

Address: 2901 Butterfield Road, Oak Brook, IL 60523

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Thomas P. McGuinness

Address: 2901 Butterfield Road, Oak Brook, IL 60523

Vice President: Senior Vice President - Angela Norton

Address: 2901 Butterfield Road, Oak Brook, IL 60523

Secretary: Robert M. Barg

Address: 2901 Butterfield Road, Oak Brook, IL 60523

Treasurer: Robert M. Barg

Address: 2901 Butterfield Road, Oak Brook, IL 60523

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. Thomas P. McGuinness, President

(Typed or printed name and capacity of person signing application)

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# Delaware

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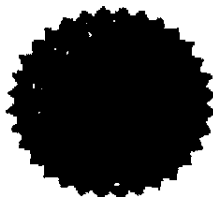
*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INLAND CONTINENTAL PROPERTY MANAGEMENT CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF FEBRUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

3854930 8300

050129761

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3689018

DATE: 02-16-05

TOTAL P.04