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### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Applied Underwriters, Inc.	
(Name of corporation	- must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Author "Certificate of Existence," and check are submitted to registe transact business in Florida.	
Please return all correspondence concerning this matter to th	e following:
Attn: Ann Wilkins	:
(Name of Person	n) RECVELL TO THE PARTY OF THE
Applied Underwriters, Inc.	
(Firm/Company	SSERY 13
P.O. Box 3646	
(Address)	POST &
Omaha, NE 68103-0646	
(City/State and Zip	code)
For further information concerning this matter, please call:	
Ann Wilkins at 402-827-3416	
(Name of Person) (Area Cod	e & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
<u> </u>	75 Filing Fee & S87.50 Filing Fee, tified Copy Certificate of Status & Certified Copy



# TALLAHASSEE, FLORIDA

### CERTIFICATE

I, Ginette Dennis, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Inland Southwest Management LLC

is an entity formed or registered under the law of

### Delaware

has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20041348885

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 10/25/2006 that have been posted, and by documents delivered to this office electronically through 10/30/2006 @ 15:37:12.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 10/30/2006 @ 15:37:12 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 6621071.



Sinette Dennis

Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <a href="http://www.sos.state.co.us/biz/CertificateSearchCriteria.do">http://www.sos.state.co.us/biz/CertificateSearchCriteria.do</a> entering the certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <a href="http://www.sos.state.co.us/click">http://www.sos.state.co.us/click</a> Business

Center and select "Frequently Asked Questions.

# 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.	. Applied Underwriters, Inc.	plied Underwriters, Inc.								
	(Enter name of corporation; must include "INCORPORA" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	TED	),"	"COMPA	NY,"	"CORPO	ORATI	ON,"		
	(If name unavailable in Florida, enter alternate corporate	nam	e a	dopted for	the p	urpose of	transa	cting busin	ess in F	Florida)
2.	. Nebraska	3	i. <u>!</u>	94-325239	93					
	(State or country under the law of which it is incorporate	1)			()	FEI numb	er, if a	pplicable)		
4.	. 3/30/2001	5	i. :	Perpetual						
	(Date of incorporation)	_ `	•	(Duration:	Year	corp, wi	ll cease	to exist o	r "perp	etual")
6.										
υ,	(Date first transacted busin	ess ir	ı F	lorida, if pi	rior to	registrat	ion)			
	(SEE SECTIONS 607.1501 & 60	7.150	02,	F.S., to de	termi	ne penalty	/ liabili	ty)≓g	9001	
7.	. <u>10805 Old Mill Road, Omaha, NE 68154</u>							52	<u> 5</u>	
		al o	ffic	e address)				石村		1
	P.O. Box 3646, Omaha, NE 68103-0646							\$23 \$23	w	1:71
	(Curren	t mai	lin	g address)		•			D	
								LOF VLS	<u>ڊ</u>	
8.	. Financial Services							<u> </u>	9	
	(Purpose(s) of corporation authorized in home state	e or o	coı	intry to be	carrie	d out in s	tate of	Florida)		
9.	. Name and street address of Florida registered agent	: (P.	0.	Box <u>NO</u>	T acc	eptable)				
	Name: CT Corporation System									
o	Office Address: 1200 South Pine Island Road									
	Plantation			, Flor	ida <u>3</u>					
	(City)					(Zip co	de)			

### 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.

Sarah B. Ayala
Assistant Secretary

(Registered agent's signature)

- 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:

A. DIRECTORS	
Chairman:	50 E
Address:	三
	\$ 10 m
Vice Chairman:	FG A D
Address:	Q O
	7
Director: Sidney Ferenc	
Address: P.O. Box 3646	
Omaha, NE 68103-0646	
Director: Steven Menzies	
Address: P.O. Box 3646	
Omaha, NE 68103-0646	·
B. OFFICERS	
President: Steven Menzies	
Address: P.O. Box 3646	
Omaha, NE 68103-0646	
Vice President: Robert Stafford	
Address: P.O. Box 3646	
Omaha, NE 68103-0646	
Secretary: Jeffrey Silver	
Address: P.O. Box 3646, Omaha, NE 68103-0646	
Treasurer: Steven Menzies	
Address: P.O. Box 3646, Omaha, NE 68103-0646	
NOTE: If necessary, you may attach an addendum to the application listing additional office	cers and/or directors.
(Signature of Director or Officer listed in number 12 of the appli	ication)
14. Jeffrey Silver, Secretary	
(Typed or printed name and capacity of person signing application)	ation)

## **ADDENDUM**

### A. DIRECTORS

Director: Jeffrey Silver

Address: P.O. Box 3646

Omaha, NE 68103-0646



STATE OF



**NEBRASKA** 

United States of America, State of Nebraska

SS.

Department of State Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

PELIED-UNDERWRITERS.

was duly incorporated under the laws of this state on March 30, 2001 and do further certify that no occupation taxes assessed are unpaid and no biennial reports are delinquent; articles of dissolution have not been filed and said corporation is in existence as of the date of this

In Testimony Whereof,

ARCH 12 18

I-have hereunto set mythand and affixed the Great Seal of the State of Nebraska on November 1, 2006.

SECRETARY OF STATE

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.