networks	95 St.	3 18	
ACCOUNT NO. REFERENCE AUTHORIZATION	: 676874	00032 20490 Patricia	Q:16
COST LIKIT	1 970.00		Æ) ``
ORDER DATE : September 8, 196 ORDER TIME : 2:12 PM ORDER NO. : 676874 CUSTOMER NO: 2049B	95	4000	01583124
CUSTONER: Michelle Jackson, L Latham & Watkins Sears Tower, Suite 233 South Wacker Dr Chicago, IL 60606	5800		
FOREIGN F NAME: HOMAR'T NEWCO			SECRETARY OF STATE DIVISION OF COMPORATION OF COMPORATION OF COMPORATION OF COMPORATION OF COMPORATION OF COMPORT OF COMP
PROFIT NON-PROFIT		RPORATE MITED PARTNERSHI	759/12
X QUALIFICATION			
PLEASE RETURN THE FOLLOWING AS CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD ST		ILING:	

CONTACT PERSON: Gail L. Shelby

APPLICATION BY FOREIGH 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. HOMAR	t MENCO ONE, INC.	1000471	O M
	I corporation: the word "INCORPORATED," "COMPANY," or "COI	RORAH	ON" OF
words or al	bbreviations of like import in language, as will clearly indicate that	IT IS & COI	poration
instead of a	f corporation: the word "INCORPORATED," COMPANY, or combined that be breviations of like import in language, as will clearly indicate that a natural person or partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership if not so contained in the name at partnership in the name at	oresent.)	
2. <u>Pelawa</u>	(State or country under the law of which it is incorporated)		
	(State or country under the law of which it is incorporated)		
g 07/27/	os 4 Perpetual		
	of Incorporation) (Duration)		
(טמוט ו	of illediporation)		
5. 36-40	31504		
	(Federal Employer Identification number, if applicable)		
	•		
6			
/Date first t	ransacted business in Florida. See sections 607.1501, 607.1502,	and 817.	.155, F.S.)
•			
7. <u>55 W.</u>	Monroe St., Ste. 3100, Chicago, IL 60603		
· <u></u>	(Current mailing address)		
8. Proper	ty management and development		
Corporate	purpose and nature of business in which it is engaged in Florida)	
(corporate	, par, para sa		
0 11	and addresses of officers and or directors:		
9. Names	and addresses of officers and of directors.		
A D1	aloue.	Ģ	달
	ectors:	S	15EC
Chairman:	N/A		-20
Address:			<u> 유로</u> 필
			<u>34m</u>
		궄	
Vice Chair	man: N/A	ယ္	
	Hall.		걸찐
Address:			- <u>'0</u>
Director:	(1) Alice M. Peterson; (2) Russell S. Davis; (3) Barry Kaufman		
Address:	55 W. Monroe St., Ste. 3100, Chicago, IL 60603		
, 1001 000.	55 W. Monroe Sc., Ste. 5100, Chicago, 12 00005		
			
Director:			
Address:		<u></u>	<u></u>

B. Office	ara:	
Prosident: _	Alice M. Peterson	
Addross: _	55 W. Monroe St., Ste. 1100, Chicago, IL 60603	
to seconda	Mt: (1) Runsell S. Davin; (2) Barry Kaufman; (1) Ronald P. I	ીમા ા દ્વાર
Address:	55 W. Monroe St., Ste. 3100, Chicago, IL 60603	
Secretary:	Warren F. Grienenberger	5 S. C.
Address:	55 W. Monroe St., Ste. 3100, Chicago, IL 60603	St of
-		212
T	Ronald P. Douglass	판
Treasurer: _ Address: _	55 W. Monroe St., Ste. 3100, Chicago, 11, 60603	ယ္
/\ddioos		2,
directors.) 10. Name	and Street address of Florida registered agent: Name:Corporation Service Company Jice Address:1201 Blays Street	
directors.) 10. Name	and Street address of Florida registered agent: Name:Corporation Service Company	ida <u>32301</u>
directors.) 10. Name Off	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 llays Street Tallahassee ,Flori	•
directors.) 10. Name Off	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 llays Street Tallahassee Florida registered agent's acceptance:	ida <u>32301</u> Zip Code
Off 11. Regist Havir	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 linys Street Tallahassee Florida registered agent and to accept service greation at the place designated in this application, I herel	ida 32301 Zip Code te of process for the a
10. Name Off 11. Regist Havir stated corporas registere	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 Blays Street Tallahassee ,Florida registered agent and to accept service agent and to accept service agent and agree to act in this capacity. I futher agree of all statutes relative to the proper and complete perform	ida 32301 Zip Code se of process for the aboy accept the appoint to comply with the nance of my duties, a
10. Name Off 11. Regist Havir stated corporas registere	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 linys Street Tallahassee Florida registered agent and to accept service greation at the place designated in this application, I herel	ida 32301 Zip Code se of process for the aboy accept the appoint to comply with the nance of my duties, a
10. Name Off 11. Regist Havir stated corporas registere provisions cam familiar v	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 Mays Street Tallahassee ,Florida registered agent and to accept service agent and to accept service agent and to accept service agent and agree to act in this application, I herely agent and agree to act in this capacity. I futher agree of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered.	ida 32301 Zip Code se of process for the a by accept the appoint to comply with the hance of my duties, a red agent.
10. Name Off 11. Regist Havir stated corporas registere provisions cam familiar states.	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 Ilays Street Tallabasee ,Florida registered agent and to accept service oration at the place designated in this application, I herely dagent and agree to act in this capacity. I futher agree of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered agent's signature:	ida 32301 Zip Code se of process for the aby accept the appoint to comply with the nance of my duties, a red agent.
10. Name Off 11. Regist Havir stated corporals registere provisions of am familiar stated corporations of the corporation of t	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 Blays Street Tallahassee ,Florida registered agent and to accept service oration at the place designated in this application, I herely agent and agree to act in this capacity. I futher agree of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered agent's signature: Stered agent's signature: Acceptance. Included is a certificate of existence duly authenticated, not make application to the Department of State, by the Secret	ida 32301 Zip Code se of process for the aboy accept the appoint to comply with the nance of my duties, a red agent. ore than 90 days priorary of State or other of the code in the code
10. Name Off 11. Regist Havir stated corporate registere provisions of am familiar visual registere provisions of a familiar visual registere provisions of a familiar visual registere registere provisions of a familiar visual registere	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 Ilays Street Tallabasee ,Florida registered agent and to accept service oration at the place designated in this application, I herely dagent and agree to act in this capacity. I futher agree of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered agent's signature:	ida 32301 Zip Code se of process for the aboy accept the appoint to comply with the nance of my duties, a red agent. ore than 90 days priorary of State or other of the code in the code
10. Name Off 11. RegIsl Havir stated corporate registere provisions cam familiar visions customatical visions cus	and Street address of FlorIda registered agent: Name: Corporation Service Company ice Address: 1201 Ilays Street Tallahassee ,Flor tered agent's acceptance: Ing been named as registered agent and to accept service oration at the place designated in this application, I herely agent and agree to act in this capacity. I futher agree of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered agent's signature: Indicate the signature: Acceptance agent and to accept service of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered agent's signature: Indicate the signature of state, by the Secret agent and to the Department of State, by the Secret agent of corporate records in the jurisdiction under the lay	ida 32301 Zip Code se of process for the aby accept the appoint to comply with the nance of my duties, a red agent. ore than 90 days priously of State or other of work which it is incorporate.
10. Name Off 11. RegIsl Havir stated corporate registere provisions cam familiar visions customatical visions cus	and Street address of Florida registered agent: Name: Corporation Service Company ice Address: 1201 Blays Street Tallahassee ,Florida registered agent and to accept service oration at the place designated in this application, I herely agent and agree to act in this capacity. I futher agree of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered agent's signature: Stered agent's signature: Acceptance. Included is a certificate of existence duly authenticated, not make application to the Department of State, by the Secret	ida 32301 Zip Code se of process for the aby accept the appoint to comply with the nance of my duties, a red agent. ore than 90 days priously of State or other of work which it is incorporate.
10. Name Off 11. Regist Havir stated corporate registere provisions cam familiar with Registere provisions campaigness and the Regis	and Street address of FlorIda registered agent: Name: Corporation Service Company ice Address: 1201 Ilays Street Tallahassee ,Flor tered agent's acceptance: Ing been named as registered agent and to accept service oration at the place designated in this application, I herely agent and agree to act in this capacity. I futher agree of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered agent's signature: Indicate the signature: Acceptance agent and to accept service of all statutes relative to the proper and complete perform with and accept the obligations of my position as registered agent's signature: Indicate the signature of state, by the Secret agent and to the Department of State, by the Secret agent of corporate records in the jurisdiction under the lay	Zip Code Te of process for the aby accept the appoint to comply with the nance of my duties, a red agent. The than 90 days priously of State or other of which it is incorposite.

KNOW ALL MEN	BY	THESE	PRESENTS
--------------	----	-------	----------

	Newco Three, Inc., Bosart Newco Four, Inc., Homant Newco Pivo	
	Newco Six, Inc. ("Companies")	
the <u>city</u>	of Coleago County of Cook in t	he
of Illino	In ha made, constituted and appointed, and BY THE	H.
ESENTS do	make, constitute and appoint Simon J. Dickens	
he clty	of Chilengo County of Cook	nd
in in 1111no	In true and lawful ATTORN cy for mo	nd
By By	name, place and stend tonign_on_my behalf for purposes	
<u>-</u>	lifying the Companies to do business in any and all states	
that h	n deemn necennary.	_
2,,,,,		(2)
	va.	_≤ <u>,</u>
	· ·	55
	-0	— :E;
		۱٬۰٬ ۲۰٬
		- 1
		;
	unto Simon J. Dickenn said ATTORN CY full power and author	<u>. </u>
if personally p fying and confir stitute shall lawl	resent at the doing thereof, with full power of substitution and revocation, her ming all that Simon J. Dickennsaid ATTORN ey or fully do or cause to be done by virtue hereof. NY WHEREOF, I have hereunto set My	
if personally pairlying and confir bititute shall lawf IN TESTIMO	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. ONY WHEREOF. I have hereunto set My hand.	
if personally prifying and confirestitute shall lawf IN TESTIMO	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN CY or will be done by virtue hereof. NY WHEREOF. I have hereunto set My hand. Hh day of August 1995 1 Delivered in Presence of Muchine 15	and
if personally programmer in the personal programmer in the personal persona	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN CY or will be done by virtue hereof. NY WHEREOF. I have hereunto set My hand. Hh day of August 1995 1 Delivered in Presence of Muchine 15	and
if personally property of the state of the s	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN CY or willy do or cause to be done by virtue hereof. SNY WHEREOF. I have hereunto set My hand hand and of August 1995 1 Delivered in Presence of Muchan 15	and
if personally programmed from the state of t	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or willy do or cause to be done by virtue hereof. DNY WHEREOF. I have hereunto set My hand. Hereof. 1995 Delivered in Presence of Much 1995 April 1995 April 1995 April 1995 April 1995	and
if personally programmed from the state of t	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. ONY WHEREOF. I have hereunto set My hand. Ith day of August 1995 I Delivered in Presence of Muchine is I Delivered in Presence of Muchine is I Delivered in Presence of Simon Muchine is I Delivered i	and EAL)
if personally prifying and confirmation of the state of t	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or willy do or cause to be done by virtue hereof. DNY WHEREOF. I have hereunto set My hand. Hereof. 1995 Delivered in Presence of Much 1995 April 1995 April 1995 April 1995 April 1995	and EAL)
if personally partifying and confirmation betitute shall law in TESTIMO al this	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. ONY WHEREOF. I have hereunto set My hand. Ith day of August 1995 I Delivered in Presence of Muchine is I Delivered in Presence of Muchine is I Delivered in Presence of Simon Muchine is I Delivered i	and EAL) EAL) ublic
if personally partifying and confirmation betitute shall law in TESTIMO al this	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. NAY WHEREOF. I have hereunto set My hand. I Delivered in Presence of Muchine in Presence of the fully set of the ful	and EAL) EAL) ublic EBY
if personally partifying and confirmation betitute shall law in TESTIMO al this	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. NY WHEREOF. I have hereunto set My hand. I Delivered in Presence of Muchania is a notary process. I ROSE A. BIGGS in and for, and residing in the said County, in the State aforesaid, DO HER CERTIFY, that ALICE METERSON whose name IS	and EAL) EAL) ublic EBY
o if personally partifying and confirmation in the shall law in the shall law and this	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. NY WHEREOF. I have hereunto set My hand. Hh day of August 1995 I Delivered in Presence of the lateral set in and for, and residing in the said County, in the State aforesaid, DO HER CERTIFY, that ALICE METTERSON personally known to me to be the same person, whose name is seribed to the foregoing instrument appeared before me this day in person.	and EAL) EAL) ublic EBY sub- and
if personally partifying and confirmation betitute shall law in TESTIMO al this	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. NY WHEREOF. I have hereunto set My hand. I Delivered in Presence of Muchania State and I Delivered in Presence of the said County, in the State aforesaid, DO HER CERTIFY, that MUCHANIA State same person, whose name is seribed to the foregoing Instrument appeared before me this day in person, and seribed to the foregoing Instrument appeared before me this day in person, and seribed that She signed, sealed and delivered the said Instrument appeared before the said Instrument appeared that She signed, sealed and delivered the said Instrument appeared that She signed, sealed and delivered the said Instrument appeared that She signed, sealed and delivered the said Instrument appeared that She signed, sealed and delivered the said Instrument appeared the said In	and EAL) EAL) ublic EBY sub- and at as
o if personally p tifying and confir ibstitute shall lawf IN TESTIMO althisL2 igned, Scaled and	resent at the doing thereof, with full power of substitution and revocation, nerming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. NY WHEREOF. I have hereunto set My hand hand hand hand have hereunto set My hand hand hand had had been been been been been been been bee	and EAL) EAL) ublic EBY sub- and at as
if personally partifying and confirmation betitute shall law in TESTIMO al this	resent at the doing thereof, with full power of substitution and revocation, nerming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. In white the day of August 1995 I Delivered in Presence of Simon Sim	and EAL) EAL) ublic EBY sub- and at as
o if personally partifying and confirmation in the shall law in the shall law and this	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. ONY WHEREOF. I have hereunto set My hand. He day of August 1995 I Delivered in Presence of the said County. In the State aforesaid, DO HER CERTIFY, that All Emperson whose name is seribed to the foregoing Instrument appeared before me this day in person, acknowledged that She signed, sealed and delivered the said Instrument free and voluntary act, for the uses and purposes therein set this day of August A. D 150	and EAL) EAL) ublic EBY sub- and at as
o if personally partifying and confirmation in the shall law in the shall law and this	resent at the doing thereof, with full power of substitution and revocation, nerming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. In which have hereunto set my hand hand to be livered in Presence of function of the foregoing Instrument appeared before me this day in person, acknowledged that She signed, sealed and delivered the said Instrument free and voluntary act, for the uses and purposes therein set of this first manner. In this first manner with the said of the supplementation of the suppleme	and EAL) EAL) ublic EBY sub- and at as
if personally partifying and confirmation betitute shall law in TESTIMO al this	resent at the doing thereof, with full power of substitution and revocation, ner ming all that Simon J. Dickens, aid ATTORN by or fully do or cause to be done by virtue hereof. ONY WHEREOF. I have hereunto set My hand. He day of August 1995 I Delivered in Presence of the said County. In the State aforesaid, DO HER CERTIFY, that All Emperson whose name is seribed to the foregoing Instrument appeared before me this day in person, acknowledged that She signed, sealed and delivered the said Instrument free and voluntary act, for the uses and purposes therein set this day of August A. D 150	and EAL) EAL) ublic EBY sub- and and at as

State of Delaware Office of the Secretary of State

T, FDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOHART NEWCO ONE, INC." IS DULY TUCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND WAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW. AS OF THE FIGHTH DAY OF SEPTEMBER, A.D. 1995.

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

SECRETARY OF STATE DIVISION OF CORPCRATIONS
95 SEP 12 PH 3: 43



Edward J. Freel, Secretary of State

AUTHENTICATION:

7633648

DATE.

09-08-95

SESERTE BADO

950203975

44 <u>40000</u> Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation I (ame) (Document #) Certified Copy □ Walk in Pick up time Will wait Photocopy Certificate of Status Mail out NEW FILINGS AMENDMENTS Profit Amendment Resignation of R.A., Officer/ Director NonProfit Change of Registered Agent **Limited Liability** Dissolution/Withdrawal Domestication 1/0500001/1/ 1/0500001/1/ Merger Other OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials CR2E031(1/95)

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

HOMART NEWCO ONE, INC. (Name of Corporation)