Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

and check are submitted to	register the above reference	ed foreign corporation to transact bu	isiness in Florida	1.		
Please return all correspon	dence concerning this matte	r to the following:	700003	70007	E7	=
	JEFFERY L. MOWER	RY	100000	53/99-010)30002	-
		(Name of Person)	***	F*70.00_#	*****70.00)
	MOWERY & SCHOENE	יים אור . יים אור דור י				
	HOWEITT & SCHOENT	(Firm/Company)		-	gen at a	*
	THREE HAWTHORN E	PARKWAY SUITE 150				
		(Address)		-		
	VERNON HILLS, II	G 60061				
		(City/State/Zip)	*****	-		_
Name of Corporations 409 E. Gaines St. Fallahassee, FL 32399	f Person)	(Area Code & Daytime Tele MAILING ADDR Qualification/Tax I Division of Corpor P.O. Box 6327 Tallahassee, FL 32	RESS: Lien Section ations	99 JUL -8 AM 7: 42 SECRETIANY OF STATE TALLA MASSEE, FLORIDA	FILED	-
Enclosed is a check for the $\overline{\mathbb{X}}$ \$70.00 Filing Fee	following amount: \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Fili Certificate Certified C	of Status &		_



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 15, 1999

JEFFERY L. MOWERY MOWERY & SCHOENFELD LLC THREE HAWTHORNE PARKWAY SUITE 150 VERNON HILLS, IL 60061

SUBJECT: TODD MINIKUS, LTD. Ref. Number: W99000013886

We have received your document for TODD MINIKUS, LTD. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not acceptable as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION, CORP., COMPANY, or CO.

A photocopy of the certificate of existence is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist

Letter Number: 599A00032075

99 JUL -8 AM 7: 4 SECNITARY OF SEC

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.

	INIKUS, LTD., INC.				Tile sile run
	orporation; must include the word "INCOF				
	ns of like import in language as will clearly		a corporation instead of a n	atural person or	
partnership	if not so contained in the name at present.)			
2. ILLINO	IS	3	336-4	236460	
(State or	IS country under the law of which it is incorp	orated)	(FEI numbe	er, if applicable)	List Saleto
`	·				
4.	06/19/1998 (Date of incorporation)	. 5.	PERPE'	TUAL	
	(Date of incorporation)	(D	uration: Year corp. will cea	se to exist or "perpetual")	Table School Turbus
	•				
6.	<u>C</u>	1/01/1999			
	(Date first transacted business in Florida.)	(SEE SECTIONS	607.1501, 607.1502 and 8	17.155, F.S.)	
- 16640	DEEDDAWH TANE				
7. 16640	DEERPATH_LANE		The second of th	Service to the control of the contro	噩~⇒、€ 次
TOVALA	TCHEE, FLORIDA 33470				
LOXANA	CHEE, FLORIDA 33470	rent mailing addre	ess)	anta ata parenti da de la var	!£2 52
	(Cui	Tent maning addit	,33)		
8. HORSE	TRAINER				
8. <u>110101</u>	(Purpose(s) of corporation authorized in	home state or coun	try to be carried out in state	e of Florida)	The section
	•				
9. Name and	street address of Florida registered agen	t: (P.O. Box or Ma	ail Drop Box NOT accepta	ble)	
~ ~	MICHELLE MACCO			SEC SEC	
- Name:	MICHELLE MASSO		Tanaan takka ali a saas sa kees is talaa aka-daalka keessa ta saata ta ta		
Office Address:	16640 DEERPATH LANE			表記「カ	
·				<u> </u>	
	LOXAHATCHEE	, Flo	rida, 33470 (Zip code)		
			(Zip code)		
				7: 42 51645 LORAD	
10. Registered	agent's acceptance:			- きゃん	
Yavina haan na	med as registered agent and to accept ser	vice of process for	the above stated cornorati	ion at the place designated	
n this application	on, I hereby accept the appointment as re	gistered agent and	agree to act in this capaci	ity. I further agree to	
omply with the	provisions of all statutes relative to the p	roper and complet	e performance of my dutie	s, and I am familiar with	
	obligations of my position as registered ag			-	
-	1111	MIA -			
	101100	11840		e	* * * *
	(Regis	tered agent's signa	iture)		

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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)
TODD MINIKUS 16640 DEERPATH LANE LOXAHATCHEE, FL 33470
MICHELLE MASSO 16640 DEERPATH LANE LOXAHATCHEE, FL 33470

A. DIKE	CTONS (Street address only - 1.0. Dox 1401 acceptable)			
Chairman:	TODD MINIKUS	=====================================		_
Address:	16640 DEERPATH LANE			
	LOXAHATCHEE, FL 33470			2 2
Vice Chair	man: MICHELLE MASSO			الماديدية ، والماديدية الماديدية الماديدية الماديدية الماديدية الماديدية الماديدية الماديدية الماديدية الماديد الماديدية الماديدية
Address:	16640 DEERPATH LANE		<u></u>	
	LOXAHATHCHEE, FL 33470			
Director:	TODD MINIKUS	<u> </u>		FowkeFill
Address:	16640 DEERPATH LANE			- 30 423
	LOXAHATCHEE, FL 33470	**		
Director:	MICHELLE MASSO			The Special
Address:	16640 DEERPATH LANE			
	LOXAHATCHEE, FL 33470	44 t		
B. OFFIC	CERS (Street address only - P.O. Box NOT acceptable)	t		
President:	TODD MINIKUS) Li	99	
Address:	16640 DEERPATH LANE	AHA	ŧ ¬	
	LOXAHATCHEE, FL 33470	SEL	8 F	,
Vice Presid	ent: MICHELLE MASSO			
Address:	16640 DEERPATH LANE	Rio	42	<u></u>
	LOXAHATCHEE, FL 33470	. 		-
Secretary:	MICHELLE MASSO	7 C.		=#AFF UTb
Address:	16640 DEERPATH LANE	THE THE STREET STREET STREET		u. v. arca
	LOXAHATCHEE, FL 33470	and the second of	and the second s	<u></u> 도구(영립)
Treasurer:	TODD MINIKUS			LI * 'AME
Address:	16640 DEERPATH LANE		7,7452-1	
	LOXAHATCHEE, FL 33470	-2		
NOTE: If 1	necessary, you may attach an addendum to the application listing additional officers and/or dir			
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	lication))	— στο ΕΕΕΣΤΑ
14.	(Typed or printed name and capacity of person cioning application)			



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 an the State of day of ____

Desse White