# F99000004861

	tion Section n of Corporations		
erm IECT.	A/C, Inc		<u> </u>
SUBJECT:	(Name of corpor	ation - must include suffix)	
Dear Sir or Mad			
"Certificate of transact busine	Application by Foreign Corporation Existence", and check are submitted as in Florida.  Il correspondence concerning this management	EDICIE	siness in Florida", oreign corporation to  102985945 09/13/9901147003 *****87.50
	Rex A. Wolfgang		<del></del>
	(Nam	ne of Person)	
		fgang & LeVay Co., L.P.A. n/Company)	
	10055 0	rika	) /
	10655 Springfield F	Address)	10 12 9/27/99
			12/1/
	Cincinnati, Ohio 45	5215	in in the
	need to call someone concerning this	, parties and the same of the	15te 9/27/99 N99-21806
	Wolfgang at (51)	(Area Code & Daytime Telephon	e Number)
·	ine of Loison)	MAILING ADDRESS:	SEDIKET DIVISION ( 99 SEP
STREET A	DDRESS:	XIII	27 一覧
Registration Division of 0 409 E. Gaine Tallahassee,	Corporations es St.	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	LED Y OF STATE YOR PORATIONS PM 4: 55
		— eno en militar de la de	\$87.50 Filing Fee,
□ \$70.00 F	Filing Fee Statu Certificate of Statu	s Certified Copy	Certificate of Status & Certified Copy



Date:

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, FL 32301 (850) 681-6528

#### HOLD

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OFFICE USE ONLY (Document #)

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Alcs	Møbile Home Pau	& Inc.
Walk In	Pick Up Time	Certified Copy
Mail Out		Certificate of Status
Will Wait		Certificate of Good Standing
Photocopy	RUSH	ARTICLES ONLY
		ALL CHARTER DOCS
Profit NonProfit Limited Liability	Amendment   Resignation of R.A. Officer/Director   Change of Registered Agent	Certificate of FICTITIOUS NAME
Domestication   Other	Dissolution/Withdrawal Merger	FICTITIOUS NAME SEARCH  CORP SEARCH
Annual Report   Fictitious Name   Name Reservation	EREGISTRATION/QUALIFICATION   Foreign   Limited Partnership   Reinstatement   Trademark   Other	



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 22, 1999

REX WOLFGANG/ CUNI, FERGUSON, WOLFGANG & LEVAY 10655 SPRINGFIELD PIKE CINCINNATI, OH 45215

SUBJECT: A/C, INQ.

Ref. Number: W99000021806

We have received your document for A/C, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 199A00046359

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned	H. Wayne Kle (Name)	ekamp	, do hereby certify
	e Board of Directors of		
	(Corporate N	lame)	
a corporation duly organ	ized and existing under the la	ws of the State of	<u>Ohio</u> ,
was duly adopted on	September 23	<u> </u>	, 19 <u>99</u> :
	A/C. Inc.		
organized and existing i	n the State of Ohio		, hereby adopts the name
	/C Mobile Home Park, I	nc.	for use in Florida.
Dated: September	23, 1999 Signature of either Chairman, Vi	-President	cer
_	H. Wayne r		

INHS19(4/96)

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

N COMPLIANCE EGISTER A FO	E WITH SECTI REIGN CORPO	ON 607.1503, I DRATION TO T	TLORIDA S RANSACT	STATUTES, BUSINESS	THE	FOLLO HE STA	OWING IS TE OF FI	SUBMI.	TED FO	100 SERVICE SE
A/C.	Inc.									J 75
(Name of corpor	ration; must include in rations of like in or partnership if n	iport in language	as will clea	arly indicate						
0hio				3	31-10	511090	)			-
(State or country	under the law o	f which it is inco	rporated)	<u> </u>		(FEI nu	mber, if ap	plicable)		_
July	9, 1998		5.		Perp	etual	_			
(Dat	te of incorporation	(n)	(I)	Duration: Yo	ear cor	p. will c	ease to exi	st or "per	petual")	
UDor	1 quali	+100t10	<u> </u>		4 1	i 17	1		1:6: :	<del></del>
(Date first transa	acted business in	(SEE SECTIO						_	-	1
a. 718	Woo	ster	47Ke		<u> </u>	4CE	HARI	<, 0	H102	45171
b. Box	97	TERRY	oal office ad	TARK		oh	, O	45	174	
		(Curren	t mailing ac	idress) ´				•		
Re	eal Es	tate	owne	ershi	$O_{l}$	<u> </u>	dec	elo	Dme	1+
(Purpose)	(s) of corporation	authorized in he	me state or	country to b	carri	ed out i	n state of F	lorida)		<u> </u>
Name and str	eet address of	Florida registe	red agent:	(P.O. Box	or Ma	ail Drop	Box NO	T accept	able)	
Name:	CT Corpor	ation System	<u> </u>					-		
ffice Address:	1200 Sout	h Pine Islar	ıd Road						-	-
	Plantatio	n		, Flo	orida _	33324 (Zip co				. –
0. Registered a	igent's accepta	nce:								
Iaving been name on this application, omply with the pr and accept the obl	, I hereby accept rovisions of all st	the appointment tatutes relative to	t as register the proper	red agent and and comple	d agree	e to act i	in this cap	acity. I fi	urther agr	ee to

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 a	and business addresses of officers and/or directors:	
A. DIRECT	CORS	9
Chairman: _	None	70 200
Address:		A ROS
		F.
Vice Chairm	an: None	<b>3 3</b>
Address:		
Director:	H. Wayne Klekamp	
Address:	810 Sycamore	
	Cincinnati, Ohio 45202	
Director:	Dianne Klekamp	
	010 Cycomore	
Addiess.	Cincinnati, Ohio 45202	
B. OFFIC		
President: _	H. Wayne Klekamp	
Address:	810 Sycamore	
	Cincinnati, Ohio 45202	
Vice Preside	nt: None	
Secretary: _	Dianne Klekamp	
Address:	810 Sycamore	
	Cincinnati, Ohio 45202	
Treasurer: _	Dianne Klekamp	
Address:	810 Sycamore	
	Cincinnati, Ohio 45202	
NOTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directe	ors.
13.		
13.	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	1)
14	H. Wayne Klekamp, President	
	(Typed or printed name and capacity of person signing application)	

# UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show A/C INC., an Ohio corporation, Charter No. 1012568, having its principal location Cincinnati, County of Hamilton, was incorporated on July 9, 1998 and is currently in GOOD STANDING upon the records of this office.

WITNESS my hand and official seal at Columbus, Ohio on

July 9, 1999

Conneth Blackwell

J. Kenneth Blackwell Secretary of State

