

L010000001232

ACCOUNT NO. : 072100000032

REFERENCE :

141407 437587

AUTHORIZATION:

COST LIMIT : \$ 130.00

ORDER DATE: May 7, 2001

ORDER TIME: 10:14 AM

ORDER NO. : 141407-005

CUSTOMER NO: 4375876

CUSTOMER: Ms. Kathleen Daly Winschel

Lewis Rice & Fingersh, L.c.

Attorneys At Law 500 North Broadway

Suite 2000

St. Louis, MO 63102

DOMESTIC FILING

NAME: C.N., LLC

500004162615---

EFFECTIVE DATE:

	ARTICLES OF	INCORPORATION
	CERTIFICATE	OF LIMITED PARTNERSHIP
XX	ARTICLES OF	ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - EXT. 1118
EXAMINER'S INITIALS:

SECRETARY OF STAT

01 MAY -8 AM 11: 42

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C.N., L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

28 Research Park Circle, St. Charles, Missouri 63304

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Corporation Service Company			
Name			
1201 Hays Street			
Florida street address (P.O. Box NOT acceptable)			
Tallahassee FL 32301			
City, State, and Zip			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

By BRIAN COURTNEY, ASSI. V.P.

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Henry F. Luepke, Authorized Representative

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

OLMAY -8 AM II: 42
SECRETARY OF STATE
TALLAHASSEE, FLORING