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Name:

Division of Corporations

Fax Number: (202) 220-0880

100-14144-46

Phone:

Account of Name: (202) 220-0880, Ext. 1

Account of Number: 120010000038

Phone: (202) 220-0880

Fax Number: (202) 220-0880

LIMITED LIABILITY COMPANY

Title Point Group LLC

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Estimated Change	1 000.000

Telephone Address:

Applicant's Name:

Method of Access:

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ARTICLE 10 DOCUMENTATION
1001

THE EXPIRED POLICY

ARTICLE 11

The name of the Insured Liability Company is:

THE EXPIRED POLICY

WITNESS WITNESSES:

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

1211 N. Franklin Street
Milwaukee, WI 53263

ARTICLE 12

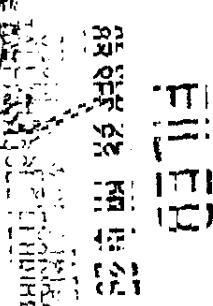
REGISTRATION, REGISTRATION OFFICE, AND REGISTERED AGENT'S SIGNATURE

The mailing and street address of the registered agent is:

Aaron J. Kibic
700 North 8th Street
Milwaukee, WI 53206

I, Aaron J. Kibic, do solemnly swear that the information contained in this document is true and accurate to the best of my knowledge, belief, and recollection, and that I have read and understood the foregoing document and that it contains no false or misleading information.

Aaron J. Kibic



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ARTICLE IV - MANAGEMENT

1. The Limited Liability Company is managed by the Administrators.

COLOSSUS FAMILY LIMITED PARTNERSHIP

COLOSSUS ENTERPRISES, LTD., Georgia Plaintiff:

John Doe, Esq., President

(This document is subject to Rule 8.4(e)(3) of the Georgia Rules of Civil Procedure which limits disclosure of signature information to the parties and their counsel (or equivalent state law statute or regulation).)