_98000001658 CORPORATE ACCESS, 1116-D Thomasville Road . Mount Vernon Square . Tallahassee, Florida 32303 INC. P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666 CERTIFIED COPY X FILING FOY. LLC (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) -08/31/98--01003--024 (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) 6.) _____(CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) 8.) _____(CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) SPECIAL INSTRUCTIONS_

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member of authorized representative of a member of Lynx Purc	chasing	
Services, L.L.Ccertifies:		
1) the above named limited liability company has at least one member;		
2) the total amount of cash contributed by the member(s) is	\$ 300.00 ;	-
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and	\$ <u>0.m</u> ;	
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$ <u>300.00</u> .	
	31/V	·
Signature of a member or an authorized representative of a men (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	AUG 31 PH	
Typed or printed name of signee	1: 26 (Na)	

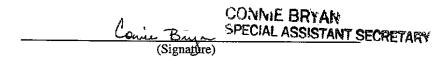
Filing Fee: \$250.00 for Application and Affidavit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:		
	Lynx Purchasing Services, L.L.C.		
2. 7	The name and the Florida street address of the registered agent and office are:	SECRETALIA	
	CT Corporation System		
	(Name)	P. P.	
	1200 South Pine Island Road	まって 記 記 記 こ 2	-
	Florida street address (P.O. Box NOT ACCEPTABLE)	\$. 8	
	Plantation FL 33324		
	City/State/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.



Filing Fee: \$ 35 for Designation of Registered Agent

State of Delaware

Office of the Secretary of State

PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LYNX PURCHASING SERVICES, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF AUGUST, A.D. 1998.

NOT BEEN ASSESSED TO DATE



2904952 8300

981330936

AUTHENTICATION:

9268363

DATE:

08-24-98