



THE UNITED STATES
CORPORATION
COMPANY

M000000002097

ACCOUNT NO. : 072100000032

REFERENCE : 851576 5017647

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : October 3, 2000

ORDER TIME : 9:56 AM

ORDER NO. : 851576-005

CUSTOMER NO: 5017647

CUSTOMER: Connie Walsh, Legal Assistant
Bryan Cave LLP
One Metropolitan Square
211 North Broadway, Suite 3600
St. Louis, MO 63102-2750

800003416818--9

FOREIGN FILINGS

NAME: REON, L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

Pattina Perich

FILED
00 OCT -6 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
00 OCT -6 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M00-2097
Q

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

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

1. REON, L.L.C.
(Name of foreign limited liability company)

2. Wisconsin 3. 39-1999873
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. 7/17/00 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. Upon qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 7701 Woodbine Lane, Wausau WI 54401
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

Robert Estill O'Neill 7701 Woodbine Lane, Wausau WI 54401

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction 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.)

11. Nature of business or purposes to be conducted or promoted in Florida: _____

rental property

Robert Estill O'Neill
Signature of a member or an authorized representative of a member.

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

Robert Estill O'Neill, the Manager

Typed or printed name of signee

FILED
00 OCT -6 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

REON, L.L.C.

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

Corporation Service Company
(Name)

1201 Hays Street
Florida street address (P.O. Box NOT ACCEPTABLE)

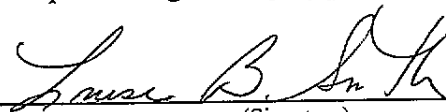
Tallahassee FL 32301
City/State/Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 OCT - 6 PM 2: 09

FILED

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..


(Signature)

Louise B. Smith, Assistant Vice President

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

REON, L.L.C.

is a domestic limited liability company organized under the laws of this state and that its date of organization is July 14, 2000.

I further certify that said company has not filed articles of dissolution with this department.

IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department on October 4, 2000.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

BY: *Robert K. Lewis*

