

CT CORPORATION SYSTEM

CORPORATION(S) NAME

M000000002631

Hibiscus, LLC

900003505849--5
-12/19/00--01055--013
****140.00 ****140.00

- | | | |
|--|---|--|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input checked="" type="checkbox"/> CUS
(3) |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name _____
 Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____

12/19/00

Order#: 3479571

Ref#: _____

Amount: \$ _____

W-29688

00 DEC 19 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

DECEMBER 19 2000
 DECEMBER 19 2000
 DECEMBER 19 2000

W-29688



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 19, 2000

CT CORPORATION SYSTEM

SUBJECT: HIBISCUS, LLC
Ref. Number: W00000029688

We have received your document for HIBISCUS, LLC and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following:

The document must contain the usual business addresses of its managing members or managers.

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) 487-6025.

Trevor Brumbley
Document Specialist

Letter Number: 200A00063710

APPROVED
AND
FILED
00 DEC 19 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

- 1. HIBISCUS, LLC (Name of foreign limited liability company)
2. WISCONSIN (Jurisdiction under the law of which foreign limited liability company is organized)
3. 39-1980849 (FEI number, if applicable)
4. DECEMBER 16, 1999 (Date of Organization)
5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6. JANUARY 5, 2000 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7. 6515 GRAND TETON PLAZA, SUITE 300 MADISON, WISCONSIN 53719 (Street address of principal office)

8. If limited liability company is a manager-managed company, check here [X]

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

E. J. PLESKO, AS CHIEF MANAGER
6515 Grand Teton Plaza, Suite 300
Madison, WI 53719

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: REAL ESTATE ACQUISITIONS

E. J. Plesko
E. J. Plesko

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.)

E. J. Plesko
Typed or printed name of signee

00 DEC 19 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED

**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:

HIBISCUS, LLC

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

Dwayne F. Jotch

(Name)

Stross Law Firm, P.A.

33920 U.S. Highway 19 North, Suite 351

Florida street address (P.O. Box NOT ACCEPTABLE)


Palm Harbor

FL

34684

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 as provided for in Chapter 608, F.S..


(Signature)

Dwayne F. Jotch

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 DEC 19 AM 8:47

APPROVED
AND
FILED

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

HIBISCUS, LLC

is a domestic limited liability company organized under the laws of this state and that its date of organization is December 16, 1999.

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 December 13, 2000.

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

BY: Robert Kairis



APPROVED
AND
FILED
00 DEC 19 AM 8:47
SECRETARY OF STATE
TAMM AHASSEE, FLORIDA