CT CORPORATION SYSTEM

(1) CLS Services, LLC (2) Fazur, LLC () Profit () Amendment () Merger () Nonprofit Foreign () Dissolution/Withdrawal () Mark () Reinstatement () Limited Partnership () Annual Report () Other YLLC () Name Registration () Change of RA () Fictitious Name () UCC () Certified Copy () Photocopies () CUS () Call When Ready () Call If Problem () After 4:30 (x) Walk In () Will Wait (x) Pick Up () Mail Out Name 4/10/01 Order#: 4034550 Availability Document Examiner Ref#: Updater Verifier W.P. Verifier Amount: \$

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



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 10, 2001

CT CORPORATION SYSTEM

SUBJECT: FAZUR, LLC

Ref. Number: W01000008084

We have received your document for FAZUR, LLC and your check(s) totaling \$125.00. 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: 801A00021284

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of foreign	limited liability company)
PENNSYVLANIA	3. 25-1843784
(Jurisdiction under the la w of which foreign limited liability company is organized)	(FEI nu mber, if applicable)
OCTOBER 5, 2000 (Date of Organization)	5. PERPETUAL (Duration: Year li mited liability company will cease to exist or "perpetual")
UPON QUALIFICATION	
245 DOMAND DOLD	e sections 608.501, 608.502, and 817.155, F.S.)
(Street address	s of principal office)
If limited liability company is a manager-managed	i company, check here 🗷
The name and usual business addresses of the man	naging members or managers are as follows:
SEE EXHIBIT A ATTACHED HERETO AND MADE A PAR	RT HEREOF
Attached is an original certificate of existence, no more than 90 jurisdiction under the law of which it is organized. (A photocopulation of the certificate under oath of the translator must be sub-	O days old, duly authenticated by the official having custody of rec py is not acceptable. If the certificate is in a foreign language, a omitted.)
	or promoted in Florida: PROVIDE SERVICES RELATED
TO ALL ASPECTS AND DIMENSIONS OF MARKETING,	EVALUATION AND FINANCING OF REAL ESTATE.
- Franci 18	
Signature of a member or an au (In accordance with section 608.408(3), I an affirmation under the penalties of per	uthorized representative of a member. F.S., the execution of this document constitutes jury that the facts stated herein are true.)

Typed or printed name of signee

FRANCIS H. AZUR

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.

STATE OF FLORIDA.	OTTION TO TO TO TO TO THE TOTAL THE
1. The name of the Limited Liability Company is:	

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

FAZUR, LLC

CT CORPORATION SYSTEM

(Name)

1200 South PINE ISLAND ROAD

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

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

MARCEY J. SMITH, ASST. SECY.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

FAZUR, LLC 345 ROUSER ROAD CORAOPOLIS, PENNSYLVANIA 15108-4726

LISTING OF DESIGNATED MANAGERS

NAME / ELECTED OFFICE	BUSINESS ADDRESS	HOME ADDRESS	
Francis H. Azur President/CEO	345 Rouser Road Coraopolis, PA 15108	111 Normandy Court Nevillewood, PA 15142	
Member of Management Committee			
Melanie B. Gefert Sr. Executive Vice President	345 Rouser Road Coraopolis, PA 15108	506 Christopher Circle Pittsburgh, PA 15205	
Christopher F. Azur Exec. Vice President/Secretary Member of Management Comm	-	4200 Muirfield Circle Nevillewood, PA 15142	
Christina A. Duranko Vice President/Treasurer	345 Rouser Road Coraopolis, PA 15108	620 Maplewood Court Pittsburgh, PA 15237	
David G. Steinmetz Vice President	345 Rouser Road Coraopolis, PA 15108	122 Jenny Lynn Drive Aliquippa, PA 15001	

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

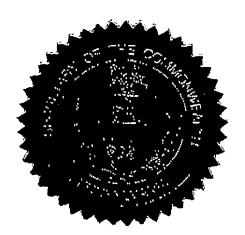
APRIL 06, 2001

TO ALL WHOM THESE PRESENTS SHALL COME. GREETING:

I DO HEREBY CERTIFY THAT.

FAZUR, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office shown as of the date herein.



IN TESTIMONY WHEREOF. I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

DPOS