MOLOGOOO 224 BLUE CHIP ADVISORS, L.L.C.

Unit M-33 87851 Old Highway Islamorada, Florida 33036

07/20/01

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 1/30

200004507612--0 -07/30/01--01115--005 ****125.00 ****125.00

Re:

Application for Authorization to Transact Business

Blue Chip Advisors, L.L.C.

To Whom It May Concern::

Enclosed please find Blue Chip Advisors, L.L.C.'s Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, the Certificate of Designation of Registered Agent/Registered Office, and an original certificate of existence from the Secretary of State of Kansas. In addition, enclosed is a check in the amount of \$125.00 in payment of the fees associated with the above filings.

Please mail the letter of acknowledgement to the address above. Thank you for your time and attention.

Sincerely,

MICHAEL D. LEONARD

Enclosures

cc: Bret M. Boeger

OI JUL 30 PM 4: 40
SECRETARY OF STATE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR <u>AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA</u>

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.	BLUE CHIP ADVISORS, L.L.C.	The state of the s	Dog az î
	(Name of foreign limited liability company)		
2.	Kansas		
	(Jurisdiction under the law of which foreign li	mited liability company is organized)	
2	İ		
3.	(FEI number, if applicable)	4. 9/10/1998	
	(FEI number, ij applicable)	(Date of Organization)	• •
5.	2030		
	(Duration: Year limited liability company wil	cease to exist or "perpetual")	·
		, come to man or perpensar y	
б.	None prior to application to transact l	ousiness in Florida	
	(Date first transacted business in Florida. See	Sections 608.501, 608.502, and 817.155, F.S.)	ft. Du≗⊹
7.	4210 West 99th Street, Overland Park	. V	
••	(Street address of principal office)	k, Kansas 6620/	
_			
8.	If limited liability company is a manag	er-managed company, check here:	
		≥°S	0
9.	The name and usual business address	sses of the managing members or managers age	e as
	follows:		
	Maria In Y	SAR	30
	Michael D. Leonard	Bret M. Boeger	
	4210 West 99th Street	10614 West 128th Street	3
	Overland Park, KS 66207	Overland Park, KS 66210	
10	Attached in an arial. I will a	. Sã	<u>+</u> 0
10.	Attached is an original certificate of ex	sistence, no more than 90 days old, duly authenticated	ated
	by the official naving custody of reco	ords in the jurisdiction under the law of which i	it ic
	organized. (A photocopy is not acceptable. certificate under oath of the translator must be	If the certificate is in a foreign language a translation of	f the
	conficule uniter bain of the translator must be	submitted.)	
11.	Nature of business or nurposes to be co	onducted or promoted in Florida: Any lawful purp	
	under the laws of the state of Florida.	inducted of promoted in Florida: Any lawful purp	ose
	of the state of the state.	A	
		Od 7/1///	
		Mill Sal 4gg	
		Signature of a member or an authorize	zed
		representative of a member. (In accordance with sec	zcu rtion
		608.408(3), R.S., the execution of this document constitutes	on.
		affirmation under the penalties of perjury that the facts stated he	rein

are true.)

Michael D. Leonard

Typed or printed name of signee

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: BLUE CHIP ADVISORS, L.L.C.
- 2. The name and the Florida street address of the registered agent and office are:

Michael D. Leonard Unit M-33 87851 Old Highway Islamorada, FL 33036

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

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

STATE OF KANSAS

OFFICE OF SECRETARY OF STATE RON THORNBURGH



To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to limited liability companies and that I am the proper official to execute this certificate.

I FURTHER CERTIFY THAT

BLUE CHIP ADVISORS, L.L.C.

is a regularly and properly organized limited liability company under the laws of the State of Kansas, having filed articles of organization in Kansas on the 10th day of September, A.D. 1998 and has paid all fees and franchise taxes due this office and is in good standing according to the records now on file in the office of Secretary of State.

In testimony whereof:
I hereto set my hand and cause
to be affixed my official seal.
Done at the City of Topeka, this
12th day of July, A.D. 2001



RON THORNBURGH SECRETARY OF STATE