CT CORPO AT LO 200001398

CORPORATION(S) NAME		,
1) CAL Management L.L.C.		02 I
. 114-114		—————————————————————————————————————

		PS B
		<u> </u>
		RIDZ RIDZ
		,
	7.00	
		2 7
() Dun fit		La
() Profit	() Amendment	() Merger Δ
() Nonprofit	(Triangle Market 1	
(x) Foreign	() Dissolution/Withdrawal	() Mark
() Timiz 1 Post 11:	() Reinstatement	
() Limited Partnership	() Annual Report	() Other
(x) LLC Registration (x) Certified Copy	() Name Registration	() Change of RA
	() Fictitious Name	() UCC
(x) Certified Copy	() Photocopies	() CUS
() Call When Ready	() Call If Problem	() 40 - 420
(x) Walk In	() Will Wait	() After 4:30
() Mail Out	() wm wan	(x) Pick Up
() Man Out		1000
Name	5/31/02	Ondon#s 5272200
Availability	3/31/02	Order#: 5372390
Document		
Examiner		kf
· · · · · · · · · · · · · · · · · · ·		Ref#:
Updater	_File First	1000056632416
Verifier	- · - · · · · · · · · · · · · · · · · · · ·	06/03/0201002006
W.P. Verifier		Amount: \$ ****125.00 ****125.00
		·

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 -06/03/02--01002--007 *****30.00 *****30.00

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: (Name of foreign limited liability company) 2 Oklahoma application submitted (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4 March 14, 2002 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") anticipated July 1, 2002 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F 4570 Westgrove Dr., Suite 220, Addison, Texas 75001 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 9. The usual business addresses of the managing members or managers are as follows: See Exhibit A 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.)

BY: CAY MANAGONDATULE

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

Signature of a member of an authorized representative of a member. (In accordance with section 608.498(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STEPPEN B. VENSE, VICE PREVIOUNT & CONTRAL COUNTY.

Typed or printed name of signee

General partner to Charity Advisors L.P.

EXHIBIT A

Harold N. McKinney 3617 Branchwood Dr. Plano, Texas 75093

E. David Furlow 3812 Villanova St. Dallas, Texas 75225

Stephen B. Yeager 3701 Villanova St. Dallas, Texas 75225

J. Lawson Ridgeway 17425 Club Hill Ct. Dallas, Texas 75248

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.

 The name of 	the Limited Liability Compar	ıy is:			
CAL	Management L.	L.C	, .		
•					
2. The name ar	id the Florida street address of	the registered age	ent and office are:		
	C T Corporation	System		OZ MAY.3 SECIRETAL TALLANJAS	
	•	(Name)	- ',- ''- '		; 끝
	1200 South Pine	Island Road	.	YY OF ST. SEE, FLO	. ED
		ss (P.O. Box <u>NOT</u> A	CCEPTABLE)		ਦ
	•		·	DA TE	-
	Plantation	FL	33324	<u> </u>	
-	\ !	City/State/Zîp			

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..

(Signatule)
CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

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

\$ 5.00 Certificate of Status (optional)

