Reply to St. Cloud Office

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October 8, 2002

REGISTRATION SECTION DIVISION OF CORPORATIONS PO BOX 6327 TALLAHASSEE FL 32314

RE:

Barclay Management Group, LLC

Our File No. 33424

500008305005--5 -10/10/02--01041--004 ****125.00 ****125.00

Dear Madam/Sir:

Please find enclosed the following documents for the above-referenced limited liability company for filing:

- 1. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
- Certificate of Designation of Registered Agent/Registered Office;
- 3. A check made payable to the Florida Secretary of State as and for the filing fee; and
- 4. State of Minnesota Certificate of Good Standing issued on October 3, 2002.

Also enclosed please find a self-addressed envelope for the return of the letter of acknowledgment.

In the event you have any questions or concerns please do not hesitate to call me. Thank you for your assistance in this matter.

Very truly yours,

Gray, Plant, Mooty, Mooty & Bennett, P.A.

Marilee Petroske Paralegal

MLP/

Enclosures

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

IN COMPLIANCE WIT LIMITED LIABILITY CO	TH SECTION 608.503, FLORIDA STATE DMPANYTO TRANSACT BUSINESS IN T	UIES, THE FOLLOWING THE STATE OF FLORIDA	IS SUBMITTED TO	REGESTER A FOREIGN	V
			É		
1. DARCLAI MANA	GEMENT GROUP, LLC	7	= =		
	(Name of foreig	n limited liability compar	(y) E	3 5 1	
2. MINNESOTA		3. 41-199719	6		
(Jurisdiction under the cor	ne law of which foreign limited liability inpany is organized)	(FEI	number, if applicable	PLOST D	-
4. <u>02/27/2001</u> (Date	of Organization)	5. PERPETUAL E. (Duration: Year linexis	XISTENCE mited liability compar st or "perpetual")	(E) F	
6. <u>01/01/2003</u>					
(Date	e first transacted business in Florida. (S	See sections 608,501, 608.	.502, and 817,155, F.S	3)	
	PINE ISLAND ROAD				
					4
PLANTATION,	FL 33324				
	(Street addre	ss of principal office)			,
8. If limited liability	y company is a manager-manage	ed company, check he	re 🔯		
9 The name and us	and business addresses of the ma	anoging mambana an -		11	
o. The hame and as	dat business addresses of the ma	magmig members or r	nanagers are as to	llows:	
MICHAEL BEMA	N P.O. BOX 1243, 130 PA	RK AVENUE, SAINT	CLOUD, MN 563	02	
ALLAN STOWE	P.O. BOX 1243, 103 PARK	AVENUE, SAINT C	LOUD, MN 56302		_
WALTER_DOWD	P.O. BOX 1243, 130 PARK	AVENUE, SAINT C	LOUD, MN 56302	<u>.</u>	
		,	*		
	<u> </u>		<u> </u>		
the jurisdiction under	al certificate of existence, no more than s r the law of which it is organized. (A ph tificate under oath of the translator must	otocopy is not acceptable.	ated by the official havi If the certificate is in a	ing custody of records in foreign language, a	
11. Nature of busine	ess or purposes to be conducted	or promoted in Florid	a: <u>LEASING OF</u>	HOTEL	
EMPLOYEES	\sim \sim \sim \sim	<u> </u>			
	Wal In Va	w0		· · · · · · · · · · · · · · · · · · ·	
	Signature of a member or an a	uthorized representat	ive of a member	Electrical Control	-
	(In accordance with section 608.408(3), an affirmation under the penalties of pe	F.S., the execution of this d	ocument constitutes		
		R DOWD	•		
	Typed or printe	ed name of signee	<u> </u>	· · -	

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:
BARCLAY MANAGEMENT GROUP, LLC
2. The name and the Florida street address of the registered agent and office are:
CT CORPORATION SYSTEMS (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.

WALTER DOWD

(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 Minnesota

SECRETARY OF STATES

TO M 10 16

Certificate of Good Standing

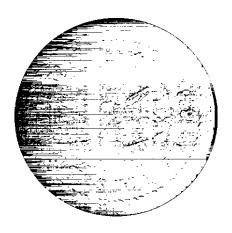
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State on the date listed below; the limited liability company is governed by Chapter 322B of Minnesota Statutes; and this limited liability company is authorized to do business as a limited liability company at the time this certificate is issued.

Name: Barclay Management Group, LLC

Date Formed or Registered: February 27, 2001

State of Organization: Minnesota

This certificate has been issued on October 3, 2002.



Mary Biffmeyer Secretary of State.