NO2000336

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
ļ			
<u> </u>			
}			
1			

Office Use Only



900008869539

11/13/02--01042--009 **125.00

AL PRIED 3:56



November 7, 2002

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re: Application for Foreign LLC Authority

Dear Regsitrar:

Please find enclosed an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, a Certificate of Designation of Registered Agent/Registered Office, a recent Certificate of Good Standing from the State of Delaware, and a check for \$125.00 to cover the Application and Designation of Registered Agent filing fees.

If you have any questions, please feel free to contact me at 503-241-7058.

Very truly yours,

Molly A. McQueen

Encl.



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

November 19, 2002

COMPASS ADVISORS, LLC 1190 PIONEER TOWER 888 SW 5TH AVE. PORTLAND, OR 97204

SUBJECT: COMPASS ADVISORS, LLC

Ref. Number: W02000032929

We have received your document for COMPASS ADVISORS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 502A00062481



December 2, 2002

Ms. Agnes Lunt Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Compass Advisors, LLC

Ref. #W02000032929

Dear Ms. Lunt:

Thank you for your letter of November 19, 2002. Enclosed please find a completed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, completed as to the date this company has first transacted business in Florida.

Please let me know if you have any questions or need additional information.

Very truly yours,

Molly A. McQueen

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.	Compass ADVISORS, LC (Name of foreign limited liability company)	;
	(Name of foreign limited liability company)	
2.	DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable).	
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable), company is organized)	•
	Fig. a	
4.	SEPTEMBER 17, 2001 5. PERPETUAL F. O T (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	1
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	-
_	[T]	<u> </u>
6.	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	
7.	1190 PIONEER TOWER, 888 SW. 5TH AUDULES OF	-
	Premary DR 97291	-
	Poerrano, OR 97201 (Street address of principal office)	
_		
8.	If limited liability company is a manager-managed company, check here	
Q	The name and usual business addresses of the managing members or managers are as follows:	
٠.	ine hame and asual susmess addresses of the managing members of managers are as follows.	
	JOSEPH K MENER	47.77
	1190 ROUBER TOWERS	٠.
	888 SW FIFTH AVENUE	-2
	PORTLAND, DR 97201	
10.	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of reco	
	the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language,	<u>a</u>
	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:	
	INVESTMENT RONGULTING	
	$\mathcal{N}_{\mathcal{A}}$	
		,
	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.)	
	JOSEPH K. MEYER	,
	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:				
Compass Adulsors, UC	- X	& -		
2. The name and the Florida street address of the registered agent and office are:		S 1 230 .	=	· _
EDWARD A. KELLY (Name)		PH 3:	E D	-
Florida street address (P.O. Box NOT ACCEPTABLE)	$\supset D$: 56		
MIAMI FL 33131 (City/State/Zip)			æ √-	<u>—</u> .: .

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.



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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMPASS ADVISORS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF OCTOBER, A.D. 2002.

FILED

OZ DEC 12 PM 3: 56

NALUMIANI GE STATE
TALLAMASCEE, FLORIDA



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 2021731

3436553 8300

020618833 DATE: 10-07-02