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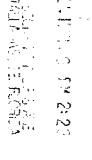
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Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer.			





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MU4-1313

King Hershey

ATTORNEYS AT LAW

ROXSEN E. KOCH

KING HERSHEY
A PROFESSIONAL CORPORATION
SUITE 2100
2345 GRAND BOULEVARD
KANSAS CITY, MISSOURI 64108
816 842 3636
816 842 2414 FAX
E-MAIL: Roch@kinghershev.com

March 24, 2004

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Re: Registration of TLCONCEPTS, LLC as a Foreign LLC

Dear Sir or Madam:

Please find enclosed check No. 36371 in the amount of one hundred sixty dollars and zero cents (\$160.00) for the Filing Fee for Application, Designation of Registered Agent, Certified Copy, and Certificate of Status. Also please find enclosed a completed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, a Certificate of Existence issued by the State of Kansas, and a Certificate of Designation of Registered Agent/Registered Office. Please return to me all original documents in the self-addressed, stamped envelope that has been provided for your convenience.

If you have any questions regarding the application, please do not hesitate to contact me.

Very truly yours,

KING HERSHEY
A Professional Corporation

Roxsen E. Koch

Enclosures

cc/enc:

Tamra Trickey

MA 9 PH 2:2

A PROFESSIONAL CORPORATION

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:

L TLCONCEPTS, LLC		
•	me of foreign limited liability company)	
Kansas (Turisdiction under the law of which foreign lim company is organized)	ited liability 3. 32-0085107 (FEI number, if applicable)	
June 13, 2003 (Date of Organization)	5. Perpetual (Duration: Year limited liability company will cease exist or "perpetual")	e to
Upon Qualification (Date first transacted business in	n Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	v Arcelo
3250 West 119th Street		
Leawood, Kansas 66209		
	(Street address of principal office)	
. If limited liability company is a manag	ger-managed company, check here	
. The name and usual business addresses	s of the managing members or managers are as follows:	
Tamra Trickey	John W. Walden	
3250 West 119th Street	3250 West 119th Street	<u> </u>
Leawood, Kansas 66029	Leawood, Kansas 66029	
	Convelinate annulal	
" -	conducted of promoted in Florida.	
event marketing and advertising for	or residential projects	
Signature of a mem (In accordance with section	aber or an authorized representative of a member. on 608.408(3), F.S., the execution of this document constitutes penalties of perjury that the facts stated herein are true.)	
Type	ed or printed name of signee	

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, according to the records of this office,

TLCONCEPTS, LLC

KANSAS LIMITED LIABILITY COMPANY Business Entity ID Number: 3483328

was filed in this office on June 16, 2003 and has complied with the applicable provisions of the laws of the State of Kansas and on this date is in good standing and authorized to transact business or to conduct its affairs within this state.

Dated: 02/03/2004

For Validation:

Certificate ID: 11453

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

https://www.accesskansas.org/businessentity/validate.html

Signed:

RON THORNBURGH SECRETARY OF STATE

FAX:8168422414

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURBUANT 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: "ILCONCEPTS, LLC		
2. The name an	the Florida strest address of the registered	agent and office are:
	NRAI Services, Inc	,
i de ser a co	(Name)	L.
W. T.	526 E. Park Avenue	(ši
Plorida street address (P.O. Box NOT ACCEPTABLE)		[ACCEPTABLE)
	Tallahassen/ FL /3230	·. !
	161-101-101-1	

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.

JRAI Services, Inc.

ではない。 というない。 となった。 \$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of States (optional)

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44. XX