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RINKE NOONAN
ATTORNEYS AT LAW

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April 5, 2004

Florida Department of State
Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Our File No. 17919.001

Dear Sir or Madam:

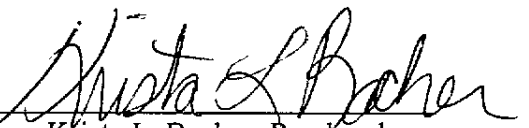
Enclosed for filing please find an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida and Certificate of Designation of Registered Agent/Registered Office for Corleen SE, LLC. I am also enclosing a Certificate of Good Standing from the Minnesota Secretary of State and a check in the amount of \$125.00 payable to the Florida Department of State for the filing fees.

Please return a letter of acknowledgment that the documents were filed to our office as soon as possible.

If you have any questions or need anything further, please call me.

Sincerely,

RINKE-NOONAN

By 
Krista L. Bacher, Paralegal

KLB/pkc

Enclosures

cc: Colleen Smith (w/encls.)

PApril 5, 2004 C2004 03 03
F: DATA:17919.001:Letter Florida Dept State (file docs) 03 03 2004 wpd pac

RINKE NOONAN GROTE SMOLEY DETER COLOMBO WIAIT VON KORFF DEGIOVANNI & HOBBS LTD

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**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. Corleen SE, LLC
(Name of foreign limited liability company)
2. Minnesota
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 20-0869978
(FEI number, if applicable)
4. 03-09-04
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. 03-09-04
(Date first transacted business in Florida. (Sec sections 608.501, 608.502, and 817.155, F.S.))
7. 19513 State Highway 371
Brainerd, MN 56401
(Street address of principal office)

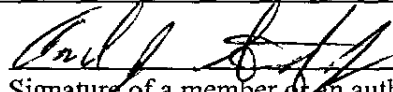
8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

Carl J. Smith, Jr.
Colleen V. Smith
19513 State Highway 371
Brainerd, MN 56401

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.)

11. Nature of business or purposes to be conducted or promoted in Florida: Own and operate Florida rental property


Signature of a member of 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.)

Carl J. Smith, Jr.

Typed or printed name of signee

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SECRETARY OF STATE

FILED
AND
NOTED

**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:

Corleen SE, LLC

2. The name and the Florida street address of the registered agent and office are:

Business Filings Incorporated

(Name)

660 East Jefferson Street

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee FL 32301

(City/State/Zip)

04 APR -8 PM 12:10
CLERK OF CIRCUIT
TALLAHASSEE, FLORIDA

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 Minnesota

SECRETARY OF STATE

Certificate of Good Standing

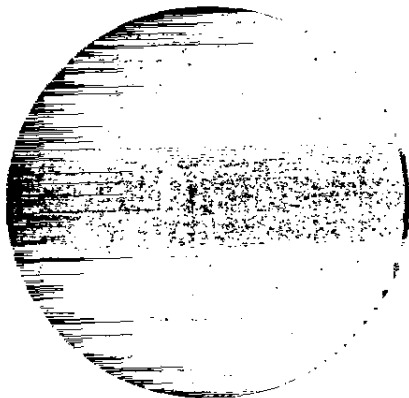
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered 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: Corleen SE, LLC

Date Formed or Registered: March 9, 2004

State of Organization: Minnesota

This certificate has been issued on March 12, 2004.



Mary Kiffmeyer
Secretary of State.