M0400001000

| (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: | _ |
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| | |

Office Use Only



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ANU FILES

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| N SERVICE COMPANY. |
|---|
| ACCOUNT NO. : 072100000032 |
| REFERENCE : 591566 4331611 |
| AUTHORIZATION : |
| COST LIMIT : \$ 125.00 |
| ORDER DATE: April 26, 2004 |
| ORDER TIME : 9:51 AM |
| ORDER NO. : 591566-005 |
| CUSTOMER NO: 4331611 |
| CUSTOMER: Lynn M. Sikora Mathis Marifian Richter & P.o. Box 307 |
| Belleville, IL 62222-0307 |
| FOREIGN FILINGS |
| NAME: FLORIDA HOLDINGS, LLC |
| |
| XXXX QUALIFICATION (TYPE: LL) |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING |
| CONTACT PERSON: Troy Todd EXT# 2940 |
| EXAMINER: |

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. Florida Holdings, LLC | | | | | |
|--|---------------|--|--------------|----------|------|
| (Name of | foreign lim | ited liability company) | | | |
| 2. Illinois | 3. | 20–1035957 | | | |
| (Jurisdiction under the law of which foreign limited I company is organized) | iability | (FEI number, if applicable) | | | |
| 4. 03/30/2004 | 5. | Perpetual | | | |
| (Date of Organization) | | (Duration: Year limited liability company vexist or "perpetual") | vill ceas | e to | |
| 604/01/2004 | | | | | |
| (Date first transacted business in Flor | rida. (See se | ections 608.501, 608.502, and 817.155, F.S.) | | | |
| 7. 1600 Wayne Lanter Memorial Avenue | | | | | |
| Madison, IL 62060 | | | | | |
| (Stree | t address of | f principal office) | | | |
| 8. If limited liability company is a manager-m | anaged co | ompany, check here | | | |
| 9. The name and usual business addresses of t | he manag | ging members or managers are as follo | ws: | | |
| Steve Lanter, 2102 Clairmont Drive, S | Shiloh, IL | . 62221 - Member | - | _ | |
| Joseph A. Winkeler, 480 Gulf Shore I | Orive, De | estin, FL 32541 - Member | | 77 | |
| Albert W. Winkeler, 465 Redwood Fo | rest Drive | e, St. Louis, MO 63021 - Member | | 60 Ai | 77.7 |
| | | | - · · | | έ |
| | | | | | |
| Attached is an original certificate of existence, no more the jurisdiction under the law of which it is organized translation of the certificate under eath of the translate | . (A photoc | copy is not acceptable. If the certificate is in a for | | | |
| 11. Nature of business or purposes to be cond | ucted or p | promoted in Florida: The transaction | n of a | ny or | |
| all lawful business which a limited liabi | lity comp | pany may be organized. | | | |
| * Al Wila | E, | | | | |
| | | norized representative of a member. | | | |
| | | , the execution of this document constitutes y that the facts stated herein are true.) | | | |
| Albert W. Winkeler | | | | | |

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 | s: | | | |
|--|--------------------------------------|----------------------------------|---|--|--|
| Florida Holdi | ngs, LLC | | | | |
| 2. The name ar | nd the Florida street address of the | registered agent and office are: | | | |
| | Joseph A. Winkeler | | | | |
| | (Na | ame) | _ | | |
| | 480 Gulf Shore Drive | | | | |
| Florida street address (P.O. Box NOT ACCEPTABLE) | | | | | |
| | Destin F | _L 32541 | | | |
| | (City/Sta | ate/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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

File Number

0114888-5



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

FLORIDA HOLDINGS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MARCH 30, 2004, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of 22ND the State of Illinois, this 2004 day of

A.D.