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(City/State/Zip/Phone #)			
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(Document Number)			
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J. BRYAN OCT 1 8 2004

JM Associates

6600 Jurupa Ave Riverside, CA 92504 Phone (909) 710-1600 Fax (909) 710-1600

October 14, 2004

Registration Section Division of Corporations 409 E Gaines St Tallahassee, FL 32301

To Whom It May Concern:

Please use the overnight package provided to mail any certificates back to our office. Thank you so mush for all your help.

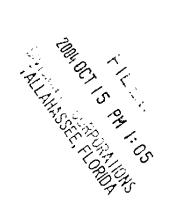
Sincerely,

Tom Tate

Project Facilitator

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2004 OCT 15 PM 1: 05
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1998-JM ASSOCIATES, L.L.C. 6600 JURUPA AVENUE RIVERSIDE, CA 92504



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

To Whom It May Concern:

Enclosed you will find the completed Application for Registration of Fictitious Name for a Foreign Limited Liability Company.

You will also find our required fee and other forms that need to be filed.

Please send any mail correspondence to:

LAURA BLODGETT 1998-JM ASSOCIATES, L.L.C. 6600 JURAPA AVENUE RIVERSIDE, CA 92504

If you have any questions regarding this application, please contact Laura Blodgett at (909) 710-1600 or by fax at (909) 710-1625.

Sincerel

Ronnie Washington Managing-Member

RW/ew

Enclosures

These documents have been completed by Erica Witt, on behalf of our member. If you have any further questions, please call (952) 928-8000 ext. 255.

ACA International

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

1998-JM Associates, L.L.C.	The Contract of the Contract o
(Name of foreign	THE FOLLOWING IS SUBMITTED TO REGISTER A FORE THE STATE OF FLORIDA: n limited liability company) 3. 33-0541933 (FEI number, if applicable)
California	3. 33-0541933
urisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
05/04/1998	5. 2032
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
Upon Qualification	
(Date first transacted business in Florida. (S	See sections 608.501, 608.502, and 817.155, F.S.)
6600 Jurupa Avenue, Riverside, CA 92504	
(Street addre	ess of principal office)
(-12	
If limited liability company is a manager-manage	ed company, check here
The name and usual business addresses of the ma	anaging members or managers are as follows:
Ronnie Anthony Washington, 6600 Jurupa Avenue, River	rside, CA 92504
John Michael Blucker, 6600 Jurupa Avenue, Riverside, C	CA 92504
Jerry Larry Villa, 6600 Jurupa Avenue, Riverside, CA 92.	504
Mary Lynn Blucker, 6600 Jurupa Avenue, Riverside, CA	92504
	SEE ATTACHMENT
Attached is an original certificate of existence, no more than 9	SEE ATTACHMENT 90 days old, duly authenticated by the official having custody of record
Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A ph	SEE ATTACHMENT 90 days old, duly authenticated by the official having custody of record to the control of the
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Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A photoanslation of the certificate under eath of the translator must. Nature of business or purposes to be conducted.	SEE ATTACHMENT 90 days old, duly authenticated by the official having custody of record to to copy is not acceptable. If the certificate is in a foreign language, a be submitted.)
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Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A ph translation of the certificate under eath of the translator must. Nature of business or purposes to be conducted Debt Collection	SEE ATTACHMENT 90 days old, duly authenticated by the official having custody of record to to copy is not acceptable. If the certificate is in a foreign language, a be submitted.)
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Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A ph translation of the certificate under eath of the translator must. Nature of business or purposes to be conducted Debt Collection Signature of a member or an a (In accordance with section 608,408(3))	SEE ATTACHMENT 90 days old, duly authenticated by the official having custody of reconotocopy is not acceptable. If the certificate is in a foreign language, a be submitted.) or promoted in Florida: authorized representative of a member. b, F.S. the execution of this document constitutes
Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A ph translation of the certificate under eath of the translator must. Nature of business or purposes to be conducted Debt Collection Signature of a member or an an an accordance with section 608,408(3)	SEE ATTACHMENT 90 days old, duly authenticated by the official having custody of reconotocopy is not acceptable. If the certificate is in a foreign language, a be submitted.) or promoted in Florida: authorized representative of a member.

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	of the Limited Liability Company is:	د_ ،
1998-JM Associa	ates, L.L.C.	DON'T PARTY
2. The name a	and the Florida street address of the registered agent and office are:	CT 15
	C T Corporation System	7
(Name)		- 65
	1200 South Pine Island Road	ONS ONS
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.

By: C Corporation System

(Signature)

Michele Miller Assistant Secretary

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

Attachment to Florida Member / Manager Information

1. Full Name:

Member/Manager:

Business Address:

City: State:

ZIP Code:

Melody Denise Villa

Member

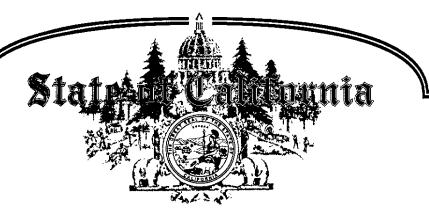
6600 Jurupa Avenue

Riverside

CA

92504





SECRETARY OF STATE

CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the **4th day of May, 1998, 1998-JM ASSOCIATES, L.L.C.**, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 1, 2004.

KEVIN SHELLEY Secretary of State

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