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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	_	
SUBJECT: White Cap Development, LLC (Name of Limitation)	ited Liability Company)	
The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are su liability company to transact business in Florida		
Please return all correspondence concerning this m	atter to the following:	
John M. Hennessey		
(Nai	me of Person)	
White Cap Development, LLC		
(Fir	m/Company)	_
12230 Chateau Court		
	(Address)	
Fishers, iN 46038		3
(City/Sta	ate and Zip Code)	29
For further information concerning this matter, plea	ase call:	D = 30
John M. Hennessey	at (317) 418-2200	30
(Name of Person)	(Area Code & Daytime Telephone Numb	er)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee  □ \$130.00 Filing Fee & Certificate of	□ \$155.00 Filing Fee & ☑ \$160.00 Filing Fee, Constants Certified Copy of Status &	Certificate Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STALLMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN	ATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN THE STATE OF FLORIDA:
1 White Cap Development, LLC	
	ited Liability Company)
2. Indiana	3, 37-1494107
(Jurisdiction under the law of which foreign limited liabi company is organized)	(FEI number, if applicable)
4. August 3, 2004	5. December 31, 2050
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	
(Date first transacted business (See sections 608.501 & 608.502	in Florida, if prior to registration.) 2 F.S. to determine penalty liability)
7. 12230 Chateau Court, Fishers, IN 46038	
(Street Add	dress of Principal Office)
8. If limited liability company is a manager-mana	aged company, check here 🛛
9. The name and usual business addresses of the	managing members or managers are as follows:
John M. Hennessey, 12230 Chateau Court, Fishe	rs, IN 46038
<del></del>	
	Er 13
	n 90 days old, duly authenticated by the official having custody of records in tocopy is not acceptable. If the certificate is in a foreign language, a esubmitted.)
11. Nature of business or purposes to be conducted	ed or promoted in Florida: Real Estate Development
Signature of a member or	in authorized representative of a member.
(In accordance with section 608.408	(3), F.S., the execution of this document constitutes of perjury that the facts stated herein are true.)
John M. Hennessey	

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.

FLORIDA.	
1. The name of the Limited Liability Company is:	
White Cap Development, LLC	
2. The name and the Florida street address of the registered agent and office are:	
Becker & Poliakoff, P.A.	
(Name)	
4501 Tamiami Trail N., Suite 214	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Naples, FL 34103 City/State/Zip	10 m
City/State/2ip	£ 1.5
Having been named as registered agent and to accept service of process for the above stat	ed limited
liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all relating to the proper and complete performance of my duties, and I am familiar with and publigations of my position as registered agent as provided for in Chapter 608, Florida Stat	statutes accept the
C. austro White	
(Signature) FOR THE FIRM	

\$ 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 INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

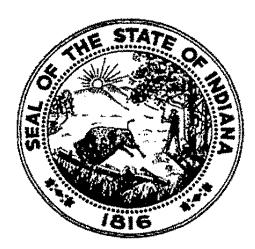
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### WHITE CAP DEVELOPMENT, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on August 03, 2004, and was in existence or authorized to transact business in the State of Indiana on November 12, 2004.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto let my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twelfth Day of November, 2004.

TODD ROKITA, Secretary of State

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