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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

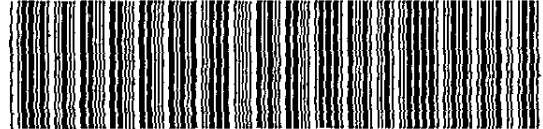
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

W04-40740
J. BRYAN NOV - 5 2004

J. BRYAN DEC 10 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Northlake Capital Partners, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Julie Regnier
(Name of Person)

Faegre & Benson LLP
(Firm/Company)

2200 Wells Fargo Building, 90 S. 7th Street
(Address)

Minneapolis, MN 55402
(City/State and Zip Code)

For further information concerning this matter, please call:

Julie Regnier at (612) 766-8311
(Name of Person) (Area Code & Daytime Telephone Number)

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 Status ☒ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 5, 2004

JULIE REGNLER
FAEGRE & BENSON LLP
2200 WELLS FARGO BUILDING, 90 S. 7TH ST.
MINNEAPOLIS, MN 55402

SUBJECT: NORTHLAKE CAPITAL PARTNERS, LLC
Ref. Number: W04000040740

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TALLAHASSEE, FLORIDA

We have received your document for NORTHLAKE CAPITAL PARTNERS, LLC and your check(s) totaling \$155.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 704A00063596

FAEGRE & BENSON LLP

2200 WELLS FARGO CENTER, 90 SOUTH SEVENTH STREET
MINNEAPOLIS, MINNESOTA 55402-3901

TELEPHONE 612.766.7000

FACSIMILE 612.766.1600

www.faegre.com

December 7, 2004

JULIE M. REGNIER
jregnier@faegre.com
612.766.8311
FILED
DEC -9 PM 3:02
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

VIA UPS

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

Re: Northlake Capital Partners, LLC
Reference No.: W04000040740

Dear Sir or Madam:

Pursuant to your letter (copy enclosed) requesting a Certificate of Good Standing to accompany the Certificate of Authority filed with your office, enclosed please find a Certificate of Good Standing for Northlake Capital Partners, LLC as issued by Delaware Secretary of State. Please return the recorded documents to my attention at the address provided above and in the Certificate of Existence.

Please contact me at (612) 766-8311 with any questions regarding this filing.

Sincerely yours,


Julie M. Regnier

Enclosures

MI:1164875.01

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Northlake Capital Partners, LLC
(Name of Foreign Limited Liability Company)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(FEI number, if applicable)
4. August 5, 2004
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. November 1, 2004
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 4231 Walnut Bend, Suite 1C
Jacksonville, FL 32257
(Street Address of Principal Office)

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

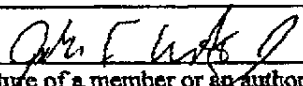
9. The name and usual business addresses of the managing members or managers are as follows:

John F. Watson, Jr. 4231 Walnut Bend, Suite 1C, Jacksonville, FL 32257

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: _____

See attached Schedule 1


Signature of a member or 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.)

John F. Watson, Jr.

Typed or printed name of signee

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TALLAHASSEE FLORIDA

**Schedule 1 to
Application by Foreign Limited Liability Company for Authorization
to Transact Business in Florida**

The purpose of the Company is to engage in any lawful act or activity for which limited liability companies may be organized to do business under the Delaware Limited Liability Company Act and permitted under Florida statutes.

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TALLAHASSEE, FLORIDA

**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:

Northlake Capital Partners, LLC

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

John F. Watson, Jr.

(Name)

4231 Walnut Bend, Suite 1C

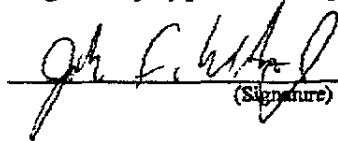
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Jacksonville

FL 32257

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, Florida Statutes.


(Signature)

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

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

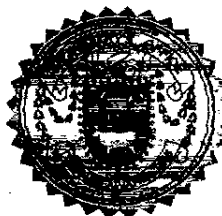
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NORTHLAKE CAPITAL PARTNERS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF DECEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NORTHLAKE CAPITAL PARTNERS, LLC" WAS FORMED ON THE FOURTH DAY OF AUGUST, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3838680 8300

AUTHENTICATION: 3513587

040866233

DATE: 12-02-04