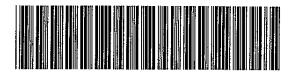
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LEONARD F. PERKINS & ASSOCIATES

Leonard F. Perkins, Attorney-at-Law 1139 N. Ridge Avenue Arlington Heights, Illinois 60004

(847) 577-0757

(Fax) (847) 577-0754

E-mail: lenperkins@comcast.net

December 15, 2004

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

Re: Foreign LLC Registration

Gentlemen:

Enclosed are the following:

- Duplicate originals of the Registration documents for Strategic Business Partners, LLC, an Illinois Limited Liability Company;
- Illinois Certificate of Good Stating; and
- 3. Check in the amount of \$125.00.

I would appreciate it if you would return a stamped copy of the Application showing the date that it was officially filed.

If you have any questions, I can be reached at the above phone number or e-mail address.

Very truly yours,

Leonard F. Perkins

LFP/ddc Enclosures

TRANSMITTAL LETTER

TO: Registration Section	一
Division of Corporations	in Bir
	EF, FLORATOR LONG
SUBJECT: STRATEGIC BUSINESS PARTNER	s, ilc
	imited Liability Company)
The enclosed "Application by Foreign Limited	Liability Company for Authorization to Transact Business in
Florida," Certificate of Existence, and check are liability company to transact business in Florida	e submitted to register the above referenced foreign limited
Please return all correspondence concerning thi	s matter to the following:
Leonard F. Perkins	s, Counsel
	Name of Person)
Leonard F. Perkins & Associates	
	(Firm/Company)
1139 N. Ridge Avenue	
	(Address)
Arlington Heights, IL 60004	
	/State and Zip Code)
(City	Totale and Exp Code)
For further information concerning this matter,	please call:
Leonard F. Perkins	at (847) 577-0757
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314

□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate tatus Certified Copy of Status & Certified Copy

Enclosed is a check for the following amount:

☐ \$130.00 Filing Fee &

Certificate of Status

1 \$125.00 Filing Fee

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

IN COMPLIANCE WITH SECTION 608.50B, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN 'LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

STRATEGIC BUSINESS PARTNE		•		S E
(Name of Which for company is organized)	e of Foreign Limited Lia 3. reign limited liability		iber, if applicable)	NO R2
4. August 28, 2003 (Date of Organization)	5.	Perpetual (Duration: Year limite exist or "perpetual")	d liability company	will change in
Date first tra (See sections 6) 3255 N. Arlington Heights Road	2_00 4/ insacted business in Flor 08.501 & 608.502 F.S. t	ida, if prior to registration o determine penalty liabil	ı) lity)	
Arlington Heights, IL 60004	(Street Address o	f Principal Office)		
3. If limited liability company is a company in the company is a company is a company is a company is a company in the company is a company in company in company in company in company is a company in com	Idresses of the mana		agers are as follo	ows:
	I. Arlington Heights Ro			
10. Attached is an original certificate of exist the jurisdiction under the law of which it is cranslation of the certificate under oath of the Nature of business or purposes	stence, no more than 90 de organized. (A photocopy e translator must be subm	ays old, duly authenticated is not acceptable. If the ce itted.)	by the official having rtificate is in a foreign	n language, a
(In accordance v	with section 608.408(3), F.S	horized representative	ment constitutes	•

Typed or printed name of signee

Charles J. Orabutt, Jr. - CEO

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 I	Liability Company is:	LONG TO TO
STRATEGIC BUSINESS PART	NERS, LLC	夏里
2. The name and the Florida	street address of the registered agent and office are:	22 PHIL
NRAI Service	es, Inc.	2: 48 RATI FLORI
	(Name)	OH SHOW
526 E. Park A	Avenue Torida Street Address (P.O. Box <u>NOT</u> ACCEPTABLE)	_
Tallahassee	FL 32301 City/State/Zip	_
	Окульшылдір	

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.

NRAI Services, Inc.

Anormy T, Accomode

ASSO Scenesory

\$ 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

0099138-4



To all to whom these Presents Shall Come, Greeting:

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

STRATEGIC BUSINESS PARTNERS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 28, 2003, 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 the State of Illinois, this day of A.D.

Desse White

SECRETARY OF STATE