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2006 MAY 30 P 4:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

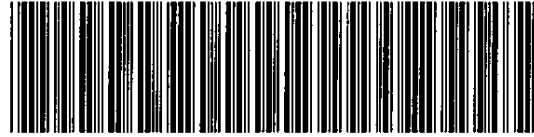
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COVER LETTER

2006 MAY 30 P 4: 01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TO: Registration Section  
Division of Corporations

SUBJECT: CHS MANAGEMENT, LLC  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LOUIS M. MEINERS, JR.

(Name of Person)

ADVOCATE CONSULTING

(Firm/Company)

9229 DELEGATES ROW, SUITE 245

(Address)

INDIANAPOLIS, IN 46240

(City/State and Zip Code)

For further information concerning this matter, please call:

YOLANDA ROBINSON

(Name of Person)

at ( 317 ) 581-4077

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee    ☐ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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

**FILED**  
MAY 30 P 4: 01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SECTION I (1-3 must be completed)**

1. Name of limited liability company as it appears on the records of the Florida Department of State: CHS MANAGEMENT, LLC
2. Jurisdiction of its organization: DELAWARE
3. Date authorized to do business in Florida: DECEMBER 27, 2005

**SECTION II (4-7 complete only the applicable changes)**

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? \_\_\_\_\_
5. New name of the limited liability company: \_\_\_\_\_
6. If the amendment changes the period of duration, indicate new period of duration: \_\_\_\_\_
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: \_\_\_\_\_
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: CHS LEASING, LLC WAS LISTED AS THE MEMBER IN ERROR ON THE FOREIGN LLC APPLICATION FOR REGISTRATION. THE CORRECT MEMBER IS PAUL SHAPIRO.
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of a member or the authorized representative of a member

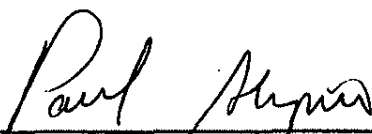
**PAUL SHAPIRO**  
\_\_\_\_\_  
Typed or printed name of signer

Filing Fee: \$25.00

**AFFIDAVIT BY CHS MANAGEMENT, LLC**  
**A FOREIGN LLC AUTHORIZED TO**  
**TRANSACTION BUSINESS IN FLORIDA**

FILED  
2006 MAY 30 P 4: 01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Name of Company: CHS Management, LLC
2. State of Formation: Delaware
3. Date of Formation: December 13, 2005
4. Date Registered in FL: December 27, 2005
5. FL Document Number: M05000007130
6. Name & Address of  
Managing Member: Paul Shapiro  
2199 NW 30<sup>th</sup> Road  
Boca Raton, FL 33431

  
\_\_\_\_\_  
Signature of Managing Member

Paul Shapiro  
\_\_\_\_\_  
Typed or printed name of signee

May 19, 2006  
\_\_\_\_\_  
Date