# M06000003674

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filling Officer.

Office Use Only



000076325320



ACCOUNT NO. : 072100000032

REFERENCE : 211278

7437044

THE WAS THE STATE OF THE STATE

AUTHORIZATION :

ORDER DATE: June 28, 2006

ORDER TIME : 12:28 PM

ORDER NO. : 211278-010

CUSTOMER NO: 7437044

#### FOREIGN FILINGS

NAME: LENONE, LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: \_\_\_\_\_



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2006

HEATHER CHAPMAN CSC TALLAHASSEE, FL

SUBJECT: LENONE, LLC Ref. Number: W06000029560 RESUBINI |
Please give original
submission date as file date

TOR JUN 29 AN IO: ON SECRETARY OF STATE ON THE PARTY OF STATE OF STATE ON THE PARTY OF STATE ON THE PARTY OF STATE ON THE PARTY OF S

We have received your document for LENONE, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The R.A. must please sign the acceptance statement on the R.A. page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 106A00043080

06 JUN 30 PM 4: 09

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: LENOne, LLC (Name of Foreign Limited Liability Company) Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable company is organized) perpetual 06/05/2006 (Duration: Year limited liability company wi (Date of Organization) exist or "perpetual") upon filing for authorization 6, (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 8400 Normandale Lake Boulevard, Suite 250 7. Minneapolis, MN 55437 (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: Gregory B. Schultz, 8400 Normandale Lake Boulevard, Suite 250, Minneapolis, MN 55437 David Flavin, 8400 Normandale Lake Boulevard, Suite 250, Minneapolis, MN 55437 Brian Murray, 6802 Paragon Place, Paragon Place II, Suite 350, Richmond, VA 23230 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: sale-leaseback and financing business for model homes. 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 ffirmation under the penalties of perjury that the facts stated herein are true

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.

1. The name of	f the Limited Liability Company is:	
LENOne, LLC		
2. The name an	nd the Florida street address of the registered agent and office are:	
	Corporation Service Company	
	(Name)	
	1201 Hays Street	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee FL 32301	
	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.

Corporation Service Company

By:

(Signature)

Troy Todd
as its agent

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

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LENONE, 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 TWENTY-EIGHTH DAY OF JUNE, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LENONE, LLC" WAS FORMED ON THE FIFTH DAY OF JUNE, A.D. 2006.

arriet Smith Hindso

DATE: 06-28-06