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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified CopiesCertificates of Status |
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DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

2006 NOV 30 AN 8: 41



ACCOUNT NO. : 072100000032

REFERENCE : 629386

7430477

AUTHORIZATION

COST LIMIT

ORDER DATE: November 29, 2006

ORDER TIME : 4:49 PM

ORDER NO. : 629386-005

CUSTOMER NO: 7430477

FOREIGN FILINGS

NAME: FORESIGHT MANAGEMENT LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:

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

| TRANSACT BUSINESS IN FLORIDA |
|---|
| IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: |
| Foresight Management LLC |
| (Name of Foreign Limited Liability Company) |
| Delaware 3 20-5878873 |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) |
| IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 1. Foresight Management LLC (Name of Foreign Limited Liability Company) 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 4. September 21, 2006 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. Upon qualification |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 7. 430 Harper Park Drive |
| Beckley, WV 25801 |
| (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: |
| Cline Resource and Development Company |
| 430 Harper Park Drive |
| Beckley, WV 25801 |
| 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 ranslation of the certificate under oath of the translator must be submitted.) |
| 11. Nature of business or purposes to be conducted or promoted in Florida: To engage in any lawful |
| activity for which company may be organized under the laws of the State of Florida |
| Donald Statement |
| 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.) |
| Donald R. Holcomb, Authorized Person |
| 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 the Limited Liability Com | npany is: | |
|--|---|---|
| Foresight Management LLC | | |
| 2. The name and the Florida street address | s of the registered agent and office are: | |
| Corporation Service | e Company | |
| | (Name) | • |
| 1201 Hays Street | | _ |
| Florida Street Ad | ddress (PO 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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FORESIGHT MANAGEMENT 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-NINTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FORESIGHT MANAGEMENT LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF SEPTEMBER, A.D. 2006.

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

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5233023

DATE: 11-29-06

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