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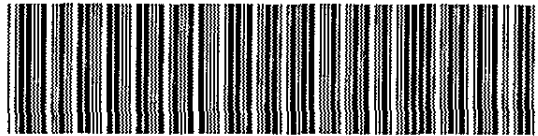
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Bank of America Tower  
50 North Laura Street, Suite 2600  
Jacksonville, Florida 32202  
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Attorneys at Law

Brian T. Crevasse  
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bcrevasse@sgrlaw.com

June 5, 2007

**VIA FEDERAL EXPRESS**

Florida Department of State  
Division of Corporations  
New Filing Section  
c/o Brenda Tadlock  
Registration Section, Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: Retroactive Qualification for Foreign Corporation

Dear Ms. Tadlock,

Pursuant to our phone conversation several weeks ago, enclosed is a retroactive "Application by a Foreign Corporation for Authorization to Transact Business in Florida." This application is retroactive for the years 1998-2002. Enclosed is a check in the amount of \$2,750, which represents a \$500 penalty for each year plus the \$50 annual report fee for each year, as well as an additional \$250 application filing fee. Also enclosed is an original Certificate of Existence for Summit Healthcare Group, LLC.

Please return all correspondence concerning this matter to:

Brian T. Crevasse  
Smith, Gambrell & Russell, LLP  
Bank of America Tower  
50 North Laura Street, Suite 2600  
Jacksonville, Florida 32202

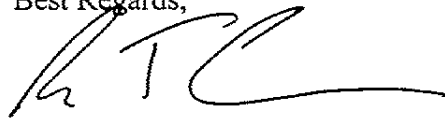
If you need additional information concerning this matter, please feel free to call me anytime at (904) 598-6131.



June 5, 2007  
Page 2

Thank you again for your valuable assistance with this matter.

Best Regards,

A handwritten signature in black ink, appearing to be 'BTC' followed by a long horizontal flourish.

Brian T. Crevasse

BTC/dlm  
Enclosures

SGRJAX\107317.1

*Bank of America Tower  
50 North Laura Street, Suite 2600  
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**SMITH, GAMBRELL & RUSSELL, LLP**  
*Attorneys at Law*

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Direct Tel: (904) 598-6131  
Direct Fax: (904) 598-6231  
bcrevasse@sgrlaw.com*

June 26, 2007

***VIA UNITED STATES MAIL***

Florida Department of State  
Division of Corporations  
New Filing Section  
c/o Brenda Tadlock  
Registration Section, Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: Retroactive Qualification of Foreign Corporation Summit Health Care Group

Dear Ms. Tadlock:

Pursuant to our phone conversation last week, enclosed is the amended application regarding Summit Healthcare Group L.L.C.'s retroactive application for Authorization to Transact Business in Florida (using the appropriate form for L.L.C.'s). Also enclosed is a check in the amount of \$80.00 for the amount that the initial application was short.

Please return all correspondence concerning this matter to:

Brian T. Crevasse, Esquire  
Smith, Gambrell & Russell, LLP  
Bank of America Tower  
50 North Laura Street, Suite 2600  
Jacksonville, Florida 32202

If you need additional information concerning this matter, please feel free to call me anytime at (904) 598-6131.

Again, thank you for your help with this matter and pointing out the deficiencies in our initial application.



Florida Department of State  
June 26, 2007  
Page 2

Best Regards,

A handwritten signature in black ink, appearing to read 'BTC', with a stylized flourish extending from the end.

Brian T. Crevasse

BTC/rab  
Enclosures

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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. Summit Healthcare Group, LLC  
(Name of Foreign Limited Liability Company)
2. Wisconsin  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. \_\_\_\_\_  
(FEI number, if applicable)
4. March 6, 1995  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Alleged to have transacted business January 1, 1998 - 2002  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 889 East Johnson Street, Fond du Luc, WI 54934  
(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:

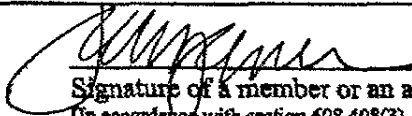
Jerry Spencer, Chairman/President

889 East Johnson Street

Fond du Luc, WI 54936

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: Design and Construction

  
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.)

Jerry Spencer

Typed or printed name of signer

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DIVISION OF CORPORATIONS  
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**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:

Summit Healthcare Group, LLC.

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

Henry G. Bachara, Jr.

(Name)

50 N. Laura Street, Suite 2600

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

Jacksonville,

FL

32202

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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DIVISION OF CORPORATIONS  
07 JUL -3 PM 3:00

DOM  
180 181 183

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

SUMMIT HEALTHCARE GROUP, L.L.C.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is March 6, 1995.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed the official seal  
of the Department on April 16, 2007.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Deputy Administrator  
Division of Corporate & Consumer Services  
Department of Financial Institutions

BY:

A handwritten signature in black ink, appearing to read "Cathy Mickelson".

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Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.