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EXAMINER



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COVER LETTER

SUBJECT:	Southwest Florida Acquisition Subsidi	ary, LLC	
		Limited Liability Company)	
Florida," Ce	· · · · · · · · · · · · · · · · · · ·	d Liability Company for Authorization to Transact Business in are submitted to register the above referenced foreign limited da	
Please retur	n all correspondence concerning the	his matter to the following:	
	Mark A. Bailey		
		(Name of Person)	
	Doninger Tuohy & Bailey LLP		
		(Firm/Company)	
	50 South Meridian Street, Suite 700		
		(Address)	
	Indianapolis, Indiana 46204		
	(Cit	ty/State and Zip Code)	
For further i	information concerning this matter	r, please call:	
Mark	k A. Bailey	at (317) 638-2400	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
MA	ILING ADDRESS:	STREET ADDRESS:	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Talle	ahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

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 LIARILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA

Southwest Electric Association Subsidies LLC	MATEOF FLORIDA.	
Southwest Florida Acquisition Subsidiary, LLC (Name of Foreign Limited Liability Company; must include	a "Limited Liability Company" "L.C." or "L.C."	
(Name of Foleign Elimited Elability Company, must include	e Limited Liability Company, L.L.C., or LLC.	
If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")		
2. Delaware 3.	None	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
February 24, 2009 5.	Perpetual	
(Date of Organization)	(Duration: Year limited liability company will ceas exist or "perpetual")	e to
Has not yet transacted business in Florida		
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	ida, if prior to registration.) o determine penalty liability)	
615 West Carmel Drive, Suite 100		o
Carmel, IN 46032		09 1VIS
(Street Address of	f Principal Office)	
. If limited liability company is a manager-managed c	ompany, check here	ن ف
. The name and usual business addresses of the manag	ging members or managers are as follows:	a 5
615 West Carmel Drive, Suite 100	3 3	:
Carmel, IN 46032		<u>-9</u> 를
Carrier, 114 40032		
0. Attached is an original certificate of existence, no more than 90 da	avs old duly authenticated by the official having cuctody.	ofracords in
ne jurisdiction under the law of which it is organized. (A photocopy i	is flot acceptable. If the certificate is in a foreign language	
anslation of the certificate under cath of the translator must be submi	(tect.)	
1. Nature of business or purposes to be conducted or	promoted in Florida: Indirect member of one or n	nore
entities doing business in Florida, buy applicant dees not curre	tly anticipate transacting business in Florida itself	
		<u>'</u>
Signature of a member or an auth	norized representative of a member.	
(In accordance with section 608.408(3), F.S. an affirmation under the penaltics of perjury	, the execution of this document constitutes	
Kevin Greisl, President/Chief Operating		
Typed or printed n	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 Con	mpany is:	
Southwest	Flordda Acquisit	tion Subsidiary, LLC	
If unavailable, the a	lternate to be used in t	the state of Florida is:	
2. The name and th	e Florida street addres	ss of the registered agent and office are:	
	c	CT Corporation System	
		(Name)	
		0 South Pine Island Road	
	Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324	
		City/State/Zip	
liability company at I agent and agree to ac relating to the proper obligations of my pos	the place designated in ct in this capacity. I fur and complete perform tition as registered age	t to accept service of process for the above this certificate, I hereby accept the appoin ther agree to comply with the provisions nance of my duties, and I am familiar with nt as provided for in Chapter 608, Florid	intment as registered of all statutes and accept the
By: Ben W	Bernad	lette McNamara	
- Den W	(Signature) ASSIS	stant Secretary	
	\$ 100.00	• • • • • • • • • • • • • • • • • • • •	
	\$ 25.00 \$ 30.00		

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTHWEST FLORIDA ACQUISITION SUBSIDIARY, 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 NINTH DAY OF JUNE, A.D. 2009.

4658856 8300

090601254

AUTHENTY CATION: 7351524

DATE: 06-09-09

You may verify this certificate online at corp.delaware.gov/authver.shtml