Michael A. Littman

Attorney at Law 10200 W. 44th Ave. #400 Wheat Ridge, CO 80033 (303)-422-8127 • Fax (303) 422-7796

July 23, 1997

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

100002249551--8 -07/28/97--01145--001 ****140.00 ****140.00

Icon Management Group, L.C.

Dear Sir or Madame:

800002272438--1 -08/20/97--01080--012 ****145.00 ****145.00

Enclosed please find the following documents for filing with your office:

- Application by Foreign Limited Liabilit Company a. for Authorization to Transact Business in Florida;
- Affidavit of Membership and Contributions of b. Foreign Limited Liability Company;
- Designation of Certificate of c. Agent/Registered Office;
- Certificate of Good Standing in the State d. Colorado; and
- Florida issued for \$140.00 Check #1005 e. Department of State for filing fees.

Please return a date stamped copy of this letter indicating you received this package in the self-addressed stamped envelope name provided.
Availability

Thank you in advance for your assistance in this matter. appreciated. Cocumentis greatly Examiner in later odater DOC yarılyar DCC inting infrement MAL:CC JUC in a saffing

Sincerely,

Michael A, Littman

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Michael A. Littman

Attorney at Law 10200 W. 44th Ave. #400 Wheat Ridge, CO 80033 (303)-422-8127 • Fax (303) 422-7796

August 11, 1997

Florida Department of State Attn: Diane Cushing Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Icon Management Group, LLC Reference No.: W97000017567

Dear Ms. Cushing:

Enclosed please find a check for \$145.00 to cover the additional cost of filing documents with your office as per your letter of July 30, 1997.

If additional funds are needed, please contact our office at your earliest convenience.

Sincerely,

Michael A. Littman

MAL:CC



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 30, 1997

MICHAEL A. LITTMAN 10200 W. 44TH AVE., #400 WHEAT RIDGE, CO 80033

SUBJECT: ICON MANAGEMENT GROUP, LLC

Ref. Number: W97000017567

We have received your document for ICON MANAGEMENT GROUP, LLC and your check(s) totaling \$140.00. However, the document has not been filed and is being retained in this office for the following:

Effective April 23, 1997, the fees to qualify a foreign limited liability company total \$285.00 and breakdown as follows: \$250.00 filing fee for the application and affidavit and \$35 registered agent designation fee. An additional \$52.50 is due for each certified copy requested and an additional \$8.75 is due for each certificate of status requested.

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) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 697A00038915

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:

C." if not so contained in the name	at present.)	the words "limited company" or their	appreviation
Colorado	3.	91-1801651	
urisdiction under the law of which fo ompany is organized)	oreign limited liabi	lity (FEI number, if applica	able)
April 28, 1997	5.		TAL
(Date of Organization)		(Duration: Year limited liability c cease to exist or "perpetual")	company will
June 1997			
(Date first transacted b	ousiness in Florida	. (See sections 608.501, 608.502, and 8	117.155, F.S.)
938 Kerwood Ci:	rcle		
Oviedo, FL 32	765		ÎDA
	(Street address of	principal office)	
		anaging member[MGRM] or ma any in Florida: (attach additional NAME & ADDRESS:	
vill manage the foreign limited NAME & ADDRESS:	liability compa	any in Florida: (attach additional	page if nece
vill manage the foreign limited	liability compa	any in Florida: (attach additional	page if nece
vill manage the foreign limited NAME & ADDRESS:	liability compa	any in Florida: (attach additional	page if nece
vill manage the foreign limited NAME & ADDRESS: William E. Wells, II	liability compa	any in Florida: (attach additional	page if nece
NAME & ADDRESS: William E. Wells, II 938 Kerwood Circle	liability compa	any in Florida: (attach additional	page if nece
NAME & ADDRESS: William E. Wells, II 938 Kerwood Circle	liability compa	any in Florida: (attach additional	page if nece
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NAME & ADDRESS: William E. Wells, II 938 Kerwood Circle	liability compa	any in Florida: (attach additional	page if nece
NAME & ADDRESS: William E. Wells, II 938 Kerwood Circle	liability compa	any in Florida: (attach additional	page if nece

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of			
ICON MANAGEMENT GROUP, LLC.	deposes and says:		
1) the above named limited liability company has at least two members. 2) the total amount of cash contributed by the member(s) is \$ 1,000.00			
3) if any, the agreed value of property other than cash contributed by member(s) \$	S) is	97 AUG	т,
4) the total amount of cash or property anticipated to be contributed by member \$ 10,000.00 . This total includes amounts from 2 and 3 above.	r(s) is FLOR	OI NV 61	ILED
$\sim \sim \sim$	ADA	35	

Signature of a member or authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:			
ICON MANAGEMENT GROUP, LLC.	·		
2. The name and address of the registered agent and office is:	TALLABA	97 AUG	<u> </u>
William E. Wells, II	ŭ,	9	
(Name) 938 Kerwood Circle	FLORII	AM IO:	ED
(P. O. Box NOT ACCEPTABLE)		35	
Oviedo, FL 32765			
(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.

CSIGNATURE)

7/17/47 (DATE)

Filing Fee: \$ 35 for Designation of Registered Agent



STATE OF COLORADO

DEPARTMENT OF STATE

CERTIFICATE

I, VICTORIA BUCKLEY, SECRETARY OF STATE OF THE STATE OF

COLORADO HEREBY CERTIFY THAT

ACCORDING TO THE RECORDS OF THIS OFFICE

ICON MANAGEMENT GROUP, LLC (COLORADO LIMITED LIABILITY COMPANY)

97 AUG 19 AN IO: 35 SECRETARE FOTATE TALLAHASSEE, FLORIDA

FILE # 19971067139 WAS FILED IN THIS OFFICE ON April 28, 1997 AND HAS COMPLIED WITH THE APPLICABLE PROVISIONS OF THE LAWS OF THE STATE OF COLORADO AND ON THIS DATE IS IN GOOD STANDING AND AUTHORIZED AND COMPETENT TO TRANSACT BUSINESS OR TO CONDUCT ITS AFFAIRS WITHIN THIS STATE.

Dated: June 03, 1997

Victoria) Buckley
SECRETARY OF STATE