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TIETOS INC. TEREORIRO		•	
. (Requestor's Nam	e)		
2805 LITTLE DEAL ROAD		_	
(Address) TALLAHASSEE, FLORIDA 32	308 (904) 385-6735		
(City, State, Zip)	· · · · · · · · · · · · · · · · · · ·	OFFICE USE ONLY	
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CORPORATION NAM	E(s) & DOCUMENT NU	UMBER(S) (if known):	20
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NEW FILINGS	AMENDMENTS	,	:0.UU
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NonProfit	Resignation of R.A., Of	AND DESCRIPTION	ت
Limited Liability	Change of Registered A	igent 2 2 2 2 2 2	^
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OTHER FILINGS	REGISTRATION/ QUALIFICATION	Capatal 18	
Annual Report	Foreign	- CORAFORL DE	
Fictitious Name	Limited Partnership	TCF-285W=18	
Name Reservation	Reinstatement	CORAFORL 18 28 CENT 8.75	
		- CF 1	
	Trademark	Examiner's Initials	

CR2E031(10/92)



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 9, 1998

FILINGS, INC.

TALLAHASSEE, FL

SUBJECT: MAUKA-MED I, L.C. Ref. Number: W98000000621

We have received your document for MAUKA-MED I, L.C. and check(s) totaling \$148.75. However, your check(s) and document are being returned for the following:

PLEASE NOTE THAT WE ARE also returning your FICTITIOUS NAME filing and the \$60.00 total in checks sent with it.

The filing fee for the foreign limited liability company is \$250.00. The required R.A. fee is \$35.00. The total amount required is \$285.00. If you also want a CUS, there will be an additional \$8.75 fee.

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) 487-6914.

Buck Kohr Corporate Specialist Letter Number: 398A0000151250H OF CORPORATION

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

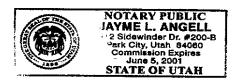
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

State of Utah Jurisdiction under the law of which fo	oreign limited liability	3. 87-0502908 FEI number, if applicable	
December 10, 1992		5 December 10, 2042	
Date of Organization		Duration: Year limited liability compar "Perpetual"	ny will cease to exist or
January 14, 1998			JAN.
Date first transacted business in Flori	da		9
3021 American Saddi	ler Drive, Pa	rk City, Utah 84060	2
St	east addraga of primainal	affica.	
	reet address of principal of		
	idress of each manag	office ing member (MGRM) or manager (MGF	R) who will manage
List name, title, and business a	idress of each manag		R) who will manage
List name, title, and business at foreign limited liability compan	idress of each manag y in Florida: TITLE: MGRM/P	ing member (MGRM) or manager (MGF	TITLE: MGRM/VP
List name, title, and business at foreign limited liability company NAME & ADDRESS: Eric D. Schifferli 3021 American Saddle	idress of each manag y in Florida: TITLE: MGRM/P	ing member (MGRM) or manager (MGF NAME & ADDRESS: Jill C. Schifferli 3021 American Saddler	TITLE: MGRM/VP
List name, title, and business at foreign limited liability company NAME & ADDRESS: Eric D. Schifferli 3021 American Saddle	idress of each manag y in Florida: TITLE: MGRM/P	ing member (MGRM) or manager (MGF NAME & ADDRESS: Jill C. Schifferli 3021 American Saddler	TITLE: MGRM/VP

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of member of
Maura-Med I, L.C. 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 \$ 59,995.
3) if any, the agreed value of property other than cash contributed by a member is \$ A description of the property is attached and made a part hereof.
4) the total amount of cash or property anticipated to be contributed by member(s) is \$\\\ 5\\\ 9,995\\\\\\\\\\\\\\\\\\\\\\\\\\
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)



James J. angel. January 6, 1998 ga

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

The name of the limited liability company is:

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

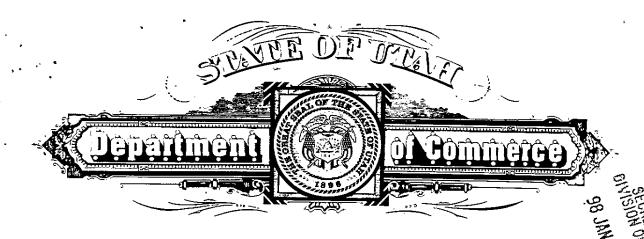
The name and address of the registered agent and office is:	98 JAN
Robert S. Forman, Esquire	7
Name	9
2101 West Commercial Boulevard, Suite 4100	7
Street Address	•••

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.

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CERTIFICATION OF GOOD STANDING

THE UTAH DIVISION OF CORPORATIONS AND COMMERCIAL CODE HEREBY CERTIFIES THAT

MAUKA-MED I, L.C.

is a Utah limited liability company and is qualified to transact business in the State of Utah. A Certificate of Organization was issued from this office on *DECEMBER 10, 1992* and said registration is in good standing,

AS APPEARS OF RECORD IN THE OFFICES OF THE DIVISION.

File Number: LC 001019



Dated thi	is	7TH		<u>.</u> da <u>u</u>	
of	January		. 19	98	
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Korla T. Woods Director, Division of

Corporations and Commercial Code