

April 22,1998

Registration Section Division of Corporations 409 East Gaines St. Tallahassee, FL 32399

Dear Sir:

98 APR 23 PM 4: 09
SECRETARY OF STATE
ANIASSEE, FLORIDA

Please find enclosed an application for authorization to transact business in Florida. Also enclosed is an original certificate of existence from the Secretary of State of Georgia. With these documents I have included a check for \$337.50 to cover registration fees for:

\$250.00 - Filing fee for Application and Affidavit

35.00 - Fee for Designation of Registered Agent

<u>52.50</u> - Certified Copy

\$337.50 - Total

Please advise me if there is any other information required.

Sincerely,

Suzanne P. Hill

Managing Director

400002498444---1 -04/23/98--01110--001 ****337.50 *****337.50

> Name Availabili**x**

> > Document

Undate

Updater

Acknowledgement

W. P. Veriuser

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:

	ed in the name at present.)	3.	58-2360689	SE 1341 186	; ;
Jurisdictio	on under the law of which foreign lims s organized)		(FEI number, if		7 77
Oct	ober 17, 1997	· 5.	2047	ASSET	
	(Date of Organization)		(Duration: Year limited liabil exist or "perpetual")	ity company: Will ce	
N/A	(Date first transacted business in	i Florida. (See se	ctions 608.501, 608.502, and 8	F228-1-1	<u> </u>
400	E. 2nd Avenue, Suite				
400					٧
Ron	ne, GA 30161-9910			 	
List name will man	e, title, and business address of eage the foreign limited liability on the NAME & ADDRESS:	each managing	orincipal office) g member[MGRM] or man orida: (attach additional p	age if necessary)	l
List name	e, title, and business address of eage the foreign limited liability NAME & ADDRESS:	each managing company in Fl	g member[MGRM] or man lorida: (attach additional p NAME & ADDRESS	age if necessary)	l
List name	e, title, and business address of eage the foreign limited liability	each managing company in Fl TTTLE: Manager	g member[MGRM] or man lorida: (attach additional p NAME & ADDRESS	age if necessary)	l
List name	e, title, and business address of eage the foreign limited liability on the second sec	each managing company in Fl TTTLE: Manager	g member[MGRM] or man lorida: (attach additional p NAME & ADDRESS	age if necessary)	l
List name	e, title, and business address of eage the foreign limited liability. NAME & ADDRESS: Suzanne P. Hill 400 E. 2nd Ave. Ste	each managing company in Fl TTTLE: Manager	g member[MGRM] or man lorida: (attach additional p NAME & ADDRESS	age if necessary)	l
List name	e, title, and business address of eage the foreign limited liability. NAME & ADDRESS: Suzanne P. Hill 400 E. 2nd Ave. Ste	each managing company in Fl TTTLE: Manager	g member[MGRM] or man lorida: (attach additional p NAME & ADDRESS	age if necessary)	l
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having custody of records in the state 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.)

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:			
The Viatical Exchange, L.C.	'00		
2 The name and the Florida street address of the registered agent and office are:	ECRETAR ALLANASS	98 APR 23	FIL
Harris N. Dvores, Esq.		70	in.
(Name)	_ E.SI	<u></u>	_
200 East Robinson Street, Suite 1250 Florida street address (P.O. Box NOT ACCEPTABLE)	A K	09	
Orlando FL 32801			
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.

Home Names (Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of THE VINTE	ICAL
EYCHANGE, LLC certifies:	•
1) the above named limited liability company has at least two members;	
2) the total amount of cash contributed by the member(s) is	\$ 30,000
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and	\$;
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$ <u>100,000</u> .
Susaine File	F 98 APR SECRET TALLAH
Signature of a member or an authorized representative of a mem (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.)	FILED 123 PM 4: 09 123 PM 4: 09 125 PM 4: 09
Suzanne P. Hill	NTE O9
Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit

Secretary of State

Corporations Division Suite 315, West Tower 2 Martin Luther King Ir. Dr. Atlanta, Georgia 30334–1530 DOCKET NUMBER : 980860722
CONTROL NUMBER : 9737732
DATE INC/AUTH/FILED: 10/22/1997
JURISDICTION : GEORGIA
PRINT DATE : 03/27/1998

FORM NUMBER : 211

CSC
KEVIN G. JOHNSON
100 PEACHTREE STREET, STE 660
ATLANTA, GA 30303

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

THE VIATICAL EXCHANGE, LLC. A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Jewis G. Massey

Lewis A. Massey Secretary of State