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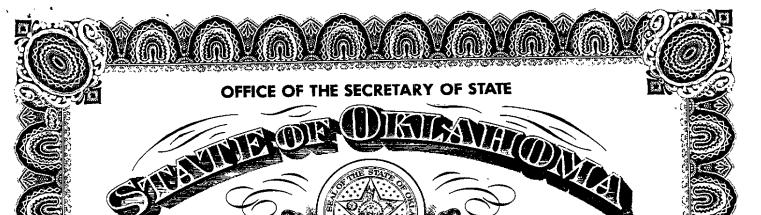
C T CORPORATION SYSTEM		•	•	
660 East Jefferson Street				
Requestor's Name	*			
Tallahassee, Florida 32301 Address (850) 222-1092		81)))))))	282
City State Zip	Phone		-05/21/98010 ****285.00 *)81008 ****285.00
CORPORATION	ON(S) NAME			
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Lincoln	Francial Hardwar	a lesosal touts,	1.4.C.	
() Profit () NonProfit (X) Limited Liability Compa	() Amendm	ent	() Merger	
(/) Foreign		on/Withdrawal	() Mark	
() Limited Partnership () Reinstatement	() Annual R () Fict. Fi		() Other () Change of R.A () UCC-1 UCC-	
() Limited Liability Partner () Certified Copy	() Photo Co	pies	() CUS	_ · _
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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 CUMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Name of foreign limited liability . L.C." if not so contained in the na	company must end wi me at present.)			ation
OKLAHOMA	3	73-1513486		
lurisdiction under the law of whi outpany is organized)	ch foreign limited lia	bility (FEI number, if a	pplicable)	
JANUARY, 199 (Date of Organization	<u>7</u> 5	50 YEARS		
(Date of Organization	m) (Duration: Year limited liability ease to exist or "perpetual")	company will	
FEBRUARY 15, 1	998			
(Date tirst transacted	business in Florida.	(See sections 608,501,608,502	and 817.155, F.S	S.)
0000 1 -1 -1	سيوسو با			
3228 N. SANTA	re			
		73/18		***************************************
OKLAHOMA C17	Y , OK (Street addres			
OKLAHOMA C17	(Street address	naging member [MGRM] o	or manager [Moonal page if nec	GR] who
OKIAHOMA CIT ist name, title, and business ill manage the foreign limite NAME & ADDRESS:	(Street address address of each maded liability companied TITLE:	inaging member [MGRM] of the provided in Florida: (attach addition name & ADDRESS:	onal page if nec	GR] who
OKLAHOMA C17 Ist name, title, and business ill manage the foreign limite NAME & ADDRESS: SHAWA P. THOMAS	(Street address address of each maded liability companied liability liabilit	inaging member [MGRM] of the provided in Florida: (attach addition name & ADDRESS:	onal page if nec	GR] who
OKIAHOMA CIT ist name, title, and business ill manage the foreign limite NAME & ADDRESS:	(Street address address of each maded liability companied liability liabilit	inaging member [MGRM] of the provided in Florida: (attach addition name & ADDRESS:	onal page if nec	JR] who
OKLAHOMA C17 st name, title, and business ill manage the foreign limite NAME & ADDRESS: SHAWA P. THOMAS (address above)	(Street address address of each maded liability companied liability liabilit	inaging member [MGRM] of the provided state	onal page if nec	JR] who cossary)
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OKLAHOMA C17 ist name, title, and business ill manage the foreign limite NAME & ADDRESS: SHAWA P. THOMAS	(Street address address of each maded liability companied liability liabilit	inaging member [MGRM] of the provided state	onal page if nec	DIVISION OF C 98 MAY 21
OKLAHOMA C17 ist name, title, and business ill manage the foreign limite NAME & ADDRESS: SHAWA P. THOMAS (address above)	(Street address address of each maded liability companied liability liabilit	inaging member [MGRM] of the provided state	onal page if nec	who secure take y of state division of corporation of state and the secure of the secu

^{9.} Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy 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 GOOD STANDING (DOMESTIC LIMITED LIABILITY COMPANY)

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma do hereby certify that I am by the laws of said State the custodian of the records of the State of Oklahoma relating to limited liability companies organized pursuant to the laws of this State, and am the proper officer to execute this certificate.

I FURTHER CERTIFY that LINCOLN FINANACIAL HARDWARE

CONSULTANTS, L.L.C., whose resident agent for service of process is: Shawn P Thomas, whose address is 2692 West I-40 Service Road, Oklahoma City, Oklahoma, is a limited liability company organized and existing under and by virtue of the laws of the State of Oklahoma and has paid the fees due this office and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of the approval of the company's financial condition or business activities and practices. Such information is not available from this office.



In testimony whereof, I have hereunto set my hand and affixed the Great Seal of the State of Oklahoma at the City of Oklahoma City this 20th, day of May, 1998.

بب

Secretary of State

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.

	JADA.		
1.	The name of the Limited Liability Company is:		
•.	LINCOLN FINANCIAL HALDWARE CONSULTANTS, C.L.C.		
-			
2.	The name and the Florida street address of the registered agent and office are:		
	C T CORPORATION SYSTEM		
	(Name)		**
	1200 South Pine Island Road		
	Florida street address (P.O. Box NOT ACCEPTABLE)		
	Plantation FL 33324 (City/State/Zip)		
	(City/State Zip)		
liai age rel obi	wing been named as registered agent and to accept service of process for the above state bility company at the place designated in this certificate. I hereby accept the appointment ent and agree to act in this capacity. I further agree to comply with the provisions of all lating to the proper and complete performance of my duties, and I am familiar with and a ligations of my position as registered agent. T CORPORATION SYSTEM	l statu	ies
	(Signature) Special Asst. Societary	98 MAY 21 PM	

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

Th	e undersigned member or authorized representative of a member of	LINCOLN	FINANCIAL
_	HARDWARE CONSULTANTS, L.L.C. certifies:		
1)	the above named limited liability company has at least two members	i	
2)	the total amount of cash contributed by the member(s) is		\$ 1,300.00;
	if any, the agreed value of property other than cash contributed by me (A description of the property is attached and made a part hereto.)	ember(s) is	s 8 ;
	and the total amount of cash and property contributed and anticipated to by member(s) is (This total includes amounts from 2 and 3 above.)	be contributed	\$ <u>4300</u> .
	Megor M. Shay, C.O.O	•	
	Signature of a member or authorized representati (In accordance with section 608,408(3), Florida Statutes, the exa affidavit constitutes an affirmation under the penalties of perjury stated herein are true.)	ve of a member cution of this	er.
	Δ		

Filing Fee: \$250,00 for Application and Affidavit