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-660 East Jefferson Street			
Requestor's Name			
Tallahassee, Florida 3230	11		
Address (850) 222-1092			
City State Zip	Phone	<b>200002670</b> -10/22/980: ****337.50	1027
CORPORAT	ION(S) NAME	****337.50	****337.50
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W.P. Verifier			
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CR2E031 (1-89)

## 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:

(NI C C ! !! !4- 4 !!-   !!!-!- !!				
company" or their abbreviations "L.I		with the words "limited liability c not so contained in the name at pre-		ited
.Iowa	3	. 42-1477113	_	
(Jurisdiction under the law of which company is organized)			pplicable)	
_December 31, 1997	5	Perpetual		
(Date of Organization)		(Duration: Year limited liability cease to exist or "perpetual")	company will	
November 2, 1998	-	· · · · · · · · · · · · · · · · · · ·		
(Date first transacted b	ousiness in Floric	la. (See sections 608.501, 608.502	2 and 817.155, F.S	S.)
MC 122491 1 Homo Compile			· · · · · · · · · · · · · · · · · · ·	
MS 122481, 1 Home Campus		<u> </u>		
Des Moines, IA 50328-0001				
	(Street add	ress of principal office)		
<ul> <li>List name, title, and business act will manage the foreign limited</li> <li>NAME &amp; ADDRESS:</li> </ul>	Idress of each and liability comp	managing member [MGRM] o pany in Florida: (attach additional) NAME & ADDRESS:	or manager [Moonal page if neo	GR] who cessary)
	111221	NAME & ADDRESS:	TITLE:	
RELS, LLC	MMGR	NAME & ADDRESS:	TITLE:	
		NAME & ADDRESS:	TITLE:	9.6 Vid
MS 122481, 1 Home Campus,		NAME & ADDRESS:	TITLE:	30 86 30 81 31 81 81 81 81 81 81 81 81 81 81 81 81 81
		NAME & ADDRESS:	TITLE:	DIVISION OF 98 OCT 2
MS 122481, 1 Home Campus,		NAME & ADDRESS:	TITLE:	OF CO
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MS 122481, 1 Home Campus,		NAME & ADDRESS:	TITLE:	OF CORPO

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.)



No. 00102933 Date: 10/19/1998

### 490DLC-0002 SECRETARY OF STATE

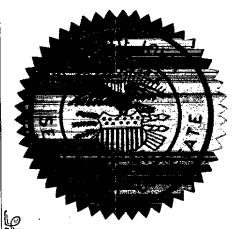
CT CORPORATION SYSTEM ATTN:NANCY LEVINE 2222 GRAND AVE DES MOINES, IA 50312

#### CERTIFICATE OF EXISTENCE

Name: VIE, L.L.C.
Begin date: 19971231
Expiration: PERPETUAL

I, PAUL D. PATE, secretary of state of the state of Iowa, custodian of the records of limited liability companies, certify that the limited liability company named on this certificate was duly organized under the laws of Iowa on the date printed above, that all fees required by the Iowa limited liability company act have been paid and that articles of dissolution have not been filed.

SECRETALY OF STATE OF STATE OF CRAFTIONS
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## 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: VIE, LLC
•	
2.	The name and address of the registered agent and office is:
	C T CORPORATION SYSTEM
	(Name)
	c/o C T CORPORATION, 1200 South Pine Island Road,
	(P.O. Box not acceptable)
	Plantation, Florida 33324
	(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.

C T CORPORATION SYSTEM

Jams m. Has.	10/21/98
James M. Halpin, Asst. Secy.	(Date)

FILING FEE: \$35 for Designation of Registered Agent

DIVISION OF CURPCRATIONS

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

Th	e undersigned member or authorized representative of a member of VIE, 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	\$ 100,000.	.00;
	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.)	\$	;
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.)	s <u>100, 000</u>	
	James Strothe		
	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.)	r.	
	James M. Strother, Executive Vice President Typed or printed name of signee		
		98 0CT 22 P <b>H l:                                   </b>	FILED SECRETARY OF STA DIVISION OF CORPORA
	Filing Fee: \$250.00 for Application and Affida	vit <b>E</b>	TIONS