

Attorneys at Law

Suite 2800 SunTrust Plaza 303 Peachtree Street, N.E. Atlanta, Georgia 30308-3252

1990000019/

Direct Dial: 404-215-8137 Internet Address: Kate_Reardon@shsl.com

300002765063---e -02/04/99--01094--001 *****285 00 *****285 00

February 3, 1999

Via UPS Overnight

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re: Foundation Capital Growth & Income Fund I, LLC

Application for Authorization to Transact Business in Florida

FILED

99 FEB -4 PM 1: 32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir/Madam:

Pursuant to Section 608.503(1), Florida Statutes, enclosed for filing are the following:

- 1. Original and one (1) copy of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
- 2. Original and one (1) copy of the Affidavit of Membership and Contributions of Foreign Limited Liability Company;
- 3. Original and one (1) copy of the Certificate of Designation of Registered Agent/Registered Office;
- 4. Original Certificate of Existence (State of Georgia) dated 1/29/99;
- 5. Original Certified Copy of Articles of Organization (State of Georgia) dated 1/29/99; and
- 6. Check in the amount of \$285.00 (\$250.00 Application Fee, \$35.00 Designation of Registered Agent fee) made payable to Florida Department of State.

According to your office, this constitutes all of the filing requirements to register and authorize Foundation Capital Growth & Income Fund I, LLC to transact business in the State of Florida. In that regard, please process this Application at your earliest convenience and forward a letter of acknowledgment directly to me at the above address.

42.10,99

63118



Florida Division of Corporations February 3, 1999 Page Two

Thank you for your kind and prompt attention to this filing. If you have any questions whatsoever, please contact me at (404) 215-8137.

Very truly yours,

Katherine Reardon, Legal Assistant For SCHNADER HARRISON SEGAL & LEWIS LLP

Enclosures

cc: Grier G. Newlin, Esq.

99 FEB -4 PM 1: 32

Sent by: SCHNADER HARRISON SEGAL LEWIS

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:

1.	FOUNDATION CAPITAL GROWTH 5	INC	OME FUND I, LLC	· —	
(Name of foreign limited liability company must end with the so contained in the name at present.)	e wor	ds "limited company" or their a	bbrevi <u>at</u> ic	n "L.C." if not
2.	Georgia	3	58-2405325	-	
7	Jurisdiction under the law of which foreign limited liability company is organized)	,	(FEI number, if a	pplicable	
4	10/21/98	5.	Perpetual	-	
7,	(Date of Organization)	T.: ***	(Duration: Year limited liabilit exist or "perpetual")	у солпрал	y will cease to
4	Upon Qualification			_	
u.	(Date first transacted business in Florida. (S	ee sec	tions 608.501, 608.502, and 81	7.155, F.S	S.)
7.					
	999 Peachtree Street, N.E.	. Sui	ite 2670, Atlanta, GA	30309	
	(City)				
		1	mambar[MCPM] or man	agerl Mo	GR]who
8. L	list name, title, and business address of each man	agıng	Intentinet [tate text] or man		_
8. L V	List name, title, and business address of each man- vill manage the foreign limited liability company	aging in Flo	orida: (attach additional pa	ge if ne	cessary)
8. I. V	vill manage the foreign limited liability company	in Flo	orida: (attach additional pa	ge if <u>n</u> e	cessary)
8. L V	List name, title, and business address of each many vill manage the foreign limited liability company NAME & ADDRESS: TITLE:	in Flo	orida: (attach additional pa	ge if <u>n</u> e	cessary)
8. I	vill manage the foreign limited liability company	in Flo	orida: (attach additional pa	ge if_ned	cessary)
8. I	vill manage the foreign limited liability company NAME & ADDRESS: TITLE:	in Flo	orida: (attach additional pa	ge if_ned	cessary)
8. I	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres.	in Flo	orida: (attach additional pa	ge if ned	cessary)
8. I	vill manage the foreign limited liability company NAME & ADDRESS: TITLE: Foundation Capital Incorporated	in Flo	orida: (attach additional pa	ge if ned	cessary)
8. L	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres.	in Flo	orida: (attach additional pa	ge if ned	FIL SECRETARY TALLAHASS
8. I	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres. 999 Peachtree St NE Ste 2670	in Flo	orida: (attach additional pa	ge if ned	FILE 99 FEB -4 SECRETARY TALLAHASSE
8. I	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres. 999 Peachtree St NE Ste 2670	in Flo	orida: (attach additional pa	ge if ned	FILE 99 FEB -4 P SECRETARY O TALLAHASSEE
V	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres. 999 Peachtree St NE Ste 2670	in Flo	orida: (attach additional pa	ge if ned	FILE 99 FEB -4 SECRETARY TALLAHASSE
V	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres. 999 Peachtree St NE Ste 2670 Atlanta, GA 30309	in Flo	orida: (attach additional pa	ge if ned	SECRETARY OF STALLAHASSEE, FLOO
V	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres. 999 Peachtree St NE Ste 2670 Atlanta, GA 30309 Wathal Bush Co-Mgr. 999 Peachtree St NE Ste 2670	in Flo	orida: (attach additional pa	ge if ned	SECRETARY OF STALLAHASSEE, FLOO
V	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres. 999 Peachtree St NE Ste 2670 Atlanta, GA 30309 Wathal Bush Co-Mgr.	in Flo	NAME & ADDRESS	ge if ned	SECRETARY OF STALLAHASSEE, FLOO
V	NAME & ADDRESS: TITLE: Foundation Capital Incorporated Rodger E. Rees, Pres. 999 Peachtree St NE Ste 2670 Atlanta, GA 30309 Wathal Bush Co-Mgr. 999 Peachtree St NE Ste 2670	in Flo	NAME & ADDRESS	ge if ned	SECRETARY OF STALLAHASSEE, FLOO

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.

I. Ine	name of the Limited Liability	y Company is:		
	Foundation Cap	ital Growth & Income Fund I, LLC	· · · · · · · · · · · · · · · · · · ·	-
2. The	e name and the Florida street a	address of the registered agent and office are	:	
	NRAI Services, Inc.	<u>. </u>	7s 9g	
		(Name)	E CRE	
	526 East Park Avenue		IARY HASS	
	Florida str	reet address (P.O. Box NOT ACCEPTABLE)	FOR B	: 0
	Tallahassee	FL 32301	STATE STATE	3
		City/State/7in	>	

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.

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 ofFOUNDATION	CAPITAL
GROWTH & INCOME FUND I, LLC certifies:	
the above named limited liability company has at least one member;	
2) the total amount of cash contributed by the member(s) is	\$ 309,000.00;
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.)	\$
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.)	\$ 1.1 million =
Rodger E. Kees Pres.	
Signature of a member or an authorized representative of a memory of a memory of a memory of the second 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.)	iber.
Rodger E. Rees Typed or printed name of signee	
**	

Filing Fee: \$250.00 for Application and Affidavit

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : K90290937

CONTROL NUMBER : K839177

DATE INC/AUTH/FILED: 10/21/1998

JURISDICTION : GEORGIA

PRINT DATE : 01/29/1999

FORM NUMBER : 211

SCHNADER HARRISON SEGAL & LEWIS KATHERINE REARDON 303 PEACHTREE ST., STE. 2800 ATLANTA, GA 30308

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

FOUNDATION CAPITAL GROWTH & INCOME FUND I, L.L.C. 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.



Cathy Cox ___ Secretary of State