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May 7, 1999

FEDERAL EXPRESS

Florida Department of State
Qualifications/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, Florida 32399

Re: Normandy Associates, L.L.C.

500002870195--B
-05/10/99--01142--012
****337.50 ****337.50

Gentlemen:

Enclosed please find an Application for Authorization to Transact Business in Florida for the above limited liability company. Please provide us with a Certified Copy of the Application. In this regard, we are enclosing a check in the amount of \$337.50 made payable to the Florida Department of State to cover the registration fee, the registered agent fee and the certified copy fee.

Please return the above documents to the undersigned by Federal Express in the enclosed self-addressed Federal Express envelope.

If you have any questions, please let us know. Your prompt attention in this matter is appreciated.

Very truly yours,

Glenn L. Valentine
Glenn L. Valentine

GLV/lk
encls.
cc: Michael D. Scarfo (via fax & mail)
normandy.st/410

Name	GL 5-12
Availability	
Document Examiner	
Updater	
Updater Verifier	
Approval	
W.P. Officer	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

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

1. Normandy Associates, L.L.C.
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)
2. Michigan
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 38-3467160
(FEI number, if applicable)
4. January 18, 1999
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 11900 Twelve Mile Road, Suite 200
Warren, Michigan 48093
(Street address of principal office)

8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:	TITLE:
M.E.M. MANAGEMENT LIMITED PARTNERSHIP	
By: Integra Investment Group, Inc., Gen.Ptr.	MGRM
750 Andover Circle	
Winter Springs, Florida 32708	

NAME & ADDRESS:	TITLE:

FILED
99 MAY 10 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 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.)

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN
LIMITED LIABILITY COMPANY**

The undersigned member or authorized representative of a member of Normandy Associates,
L.L.C. certifies:

1) the above named limited liability company has at least one member;

2) the total amount of cash contributed by the member(s) is \$ 25,000.00 ;

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.)
and

4) the total amount of cash and property contributed and anticipated to be contributed
by member(s) is \$ 25,000.00 ;
(This total includes amounts from 2 and 3 above.)

M.E.M. MANAGEMENT LIMITED PARTNERSHIP

By: Integra Investment Group, Inc., General Partner

By:

~~Signature of a member or an 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.)~~

Michael D. Scarfo, President

Typed or printed name of signee

FILED
99 MAY 10 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$250.00 for Application and Affidavit

**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:

Normandy Associates, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

Michael D. Scarfo

(Name)

750 Andover Circle, _____

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Winter Springs, FL 32708

City/State/Zip

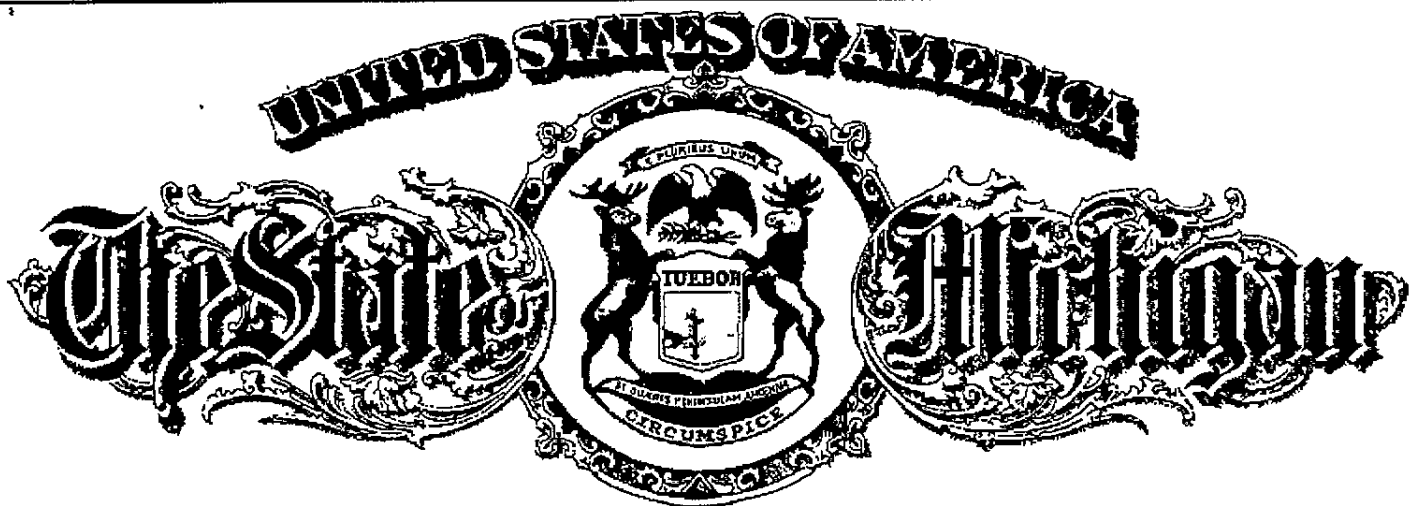
FILED
99 MAY 10 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Michael D. Scarfo

Filing Fee: \$ 35 for Designation of Registered Agent



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

NORMANDY ASSOCIATES, L.L.C.

a Michigan limited liability company, filed Articles of Organization in this office on January 28, 1999.

I FURTHER CERTIFY that the Articles are in full force and effect as of this date, and a Certificate of Dissolution has not been filed.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 26th day of April, 1999.



171L 0424872

Julie Croll

, Director

Corporation, Securities and Land Development Bureau