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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1 | None Better Development LI | LC | | |
|---------|--|------------------------|--|-----------------------|
| (Name | e of foreign limited liability company ratained in the name at present.) | must end with the we | ords "limited company" or their abbre | viation "L.C." if not |
| 2. | Delaware | 3 | applied for | |
| (Juriso | liction under the law of which foreign my is organized) | limited liability | (FEI number, if applied | cable) |
| 4 | May 14, 1999 (Date of Organization) | 5 | perpetual | |
| | (Date of Organization) | 100 0 | (Duration: Year limited liability co exist or "perpetual") | mpany will cease to |
| 6 | upon filing | | | 5 F815 6 |
| | (Date first transacted busines | ss in Florida. (See se | ections 608.501, 608.502, and 817.15 | 5, F.S.) 6 |
| 7 | 222 North LaSalle Street, | Ste. 1414, Ch | icago, Illinois 60601 | |
| | | | | ™ |
| | | (Street address of | principal office) | - B D |
| | | | | 100 |
| | ame, title, and business address | | | |
| will m | nanage the foreign limited liabili | ty company in Fl | lorida: (attach additional page i | f necessary) |
| | | | | |
| | NAME & ADDRESS: | TITLE: | NAME & ADDRESS: | TITLE: |
| | NAME & ADDRESS: Henry Hyatt | TITLE: | NAME & ADDRESS: | TITLE: |
| | | MGR _ | NAME & ADDRESS: | TITLE: |
| | Henry Hyatt | MGR | NAME & ADDRESS: | TITLE: |
| | Henry Hyatt 222 N. LaSalle St., | MGR | NAME & ADDRESS: | TITLE: |
| | Henry Hyatt 222 N. LaSalle St., | MGR | NAME & ADDRESS: | TITLE: |
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| | Henry Hyatt 222 N. LaSalle St., | MGR | | TITLE: |
| | Henry Hyatt 222 N. LaSalle St., | MGR | | TITLE: |

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 ofNone Bette | er |
|--|---------------------------------------|----------------------|
| Development LLC | certifies: | |
| 1) the above named limited liability company has at lea | ast one member; | |
| 2) the total amount of cash contributed by the member | (s) is | \$_1,000.00 ; |
| 3) if any, the agreed value of property other than cash of (A description of the property is attached and made and | | \$ <u>0.00</u> ; |
| 4) the total amount of cash and property contributed an by member(s) is (This total includes amounts from 2 and 3 above.) | nd anticipated to be contributed | \$ <u>1,000.00</u> . |
| Signature of a member or an autho (In accordance with section 608.408(3), Flo affidavit constitutes an affirmation under the | orida Statutes, the execution of this | |
| Terri L. Counts, Authoriz | ed Person | |
| Typed or prin | ted name of signee | |

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.

| l. | The name of the Limited Liability Company is: | | | |
|--|---|------------|-----------|----|
| _ | None Better Development LLC | <u>.</u> | | |
| 2. | The name and the Florida street address of the registered agent and office are: | | | |
| | C T Corporation | TAT SE(| 99 | |
| | (Name) | | MAY | 7] |
| Florida street address (P.O. Box NOT ACCEPTABLE) | | | 8 | |
| | | | PM 4: | |
| | Plantation FL 33324 | | <u>01</u> | _ |
| | 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.

O (Sigimun 6)

Filing Fee: \$35 for Designation of Registered Agent

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NONE BETTER DEVELOPMENT LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF MAY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AUTHENTICATION:

9745608

05-14-99

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