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400002888554 ****285.00 CORPORATION NAME(S) AND DOCUMENT NUMBER(S) (if known): Equities LLC Seniors Certified Copy Pick Up Time Walk In Certificate of Status Mail Out Certificate of Good Standing RUSH ARTICLES ONLY ALL CHARTER DO SAMENDMENTS Amendment Profit Resignation of R.A. Officer/Director NonProfit Certificate of FICTITIO Change of Registered Agent Limited Llability Dissolution/Withdrawal Domestication FICTITIOUS NAM Other Merger CORP SEARCI REGISTRATION/QUALIFICATION DEOTHER FILINGS Annual Report Foreign Limited Parmership Fictitious Name Reinstatement Name Reservation Trademark

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:

ame of foreign limited liability company contained in the name at present.)	must end with the	words "limited company" or their abb	reviation "L.C." if	
Delaware isdiction under the law of which foreign limited liability upany is organized)		3. Applied for		
		(FEI number, if applicable)		
12/18/98		5. 1/31/2099		
(Date of Organization)		(Duration: Year limited liability co exist or "perpetual")	mpany will cease t	
To date, business not in	operation.			
(Date first transacted busine	ess in Florida. (See	sections 608.501, 608.502, and 817.15	5, F.S.)	
755 Almar Parkway, Suit	e C	-		
Bourbonnais, IL 60914				
t name, title, and business address	of each managir	f principal office) ng member[MGRM] or manager Florida: (attach additional page i	[MGR]who f necessary)	
t name, title, and business address	of each managir	ng member[MGRM] or manager	[MGR]who f necessary) TITLE:	
et name, title, and business address	of each managir	ng member[MGRM] or manager Florida: (attach additional page in	f necessary)	
st name, title, and business address ll manage the foreign limited liabil	of each managing ity company in I	ng member[MGRM] or manager Florida: (attach additional page in	f necessary)	
st name, title, and business address all manage the foreign limited liabil NAME & ADDRESS: Blair Minton	of each managing lity company in I TITLE: Manager C	ng member[MGRM] or manager Florida: (attach additional page in	f necessary)	
name, title, and business address all manage the foreign limited liabil NAME & ADDRESS: Blair Minton 755 Almar Parkway, # Bourbonnais, IL 6091	of each managinality company in I TITLE: Manager C	ng member[MGRM] or manager Florida: (attach additional page in	f necessary)	
name, title, and business address all manage the foreign limited liabil NAME & ADDRESS: Blair Minton 755 Almar Parkway, # Bourbonnais, IL 6091	of each managing lity company in I TITLE: Manager C	ng member[MGRM] or manager Florida: (attach additional page in	f necessary)	
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name, title, and business address all manage the foreign limited liabil NAME & ADDRESS: Blair Minton 755 Almar Parkway, # Bourbonnais, IL 6091	of each managinality company in I TITLE: Manager C	ng member[MGRM] or manager Florida: (attach additional page in	f necessary)	

^{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 ofSenior.	<u>s</u>
Equities LLCcertifies:	
1) the above named limited liability company has at least one member;	
2) the total amount of cash contributed by the member(s) is	\$ 6,000.00
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	\$ <u> </u>
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.)	\$ 6,000.00
Blace Mit	
Signature of a member or an authorized representative of a mem (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.)	ber.
Blair Minton	
Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit

SECRETARY OF STATE OIVISION OF CORPORATIONS

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.

Seniors I	Equities LLC			,
2. The name a	nd the Florida street address o	f the registered a	gent and office are:	
	NRAI Service, I	nc.		
		(Name)	, .	- 9
	526 E. Park Aver	nue	-	SECRETAR JVISION OF C
	Florida street addre	ess (P.O. Box NOT	ACCEPTABLE)	OF C
-	Tallahassee	FL City/State/Zip	32301	CORPORATIONS PM 2: 56

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.

Jarof C. Setert, Asst. Sec. (Signature)

1. The name of the Limited Liability Company is:

Filing Fee: \$ 35 for Designation of Registered Agent

State of Delaware

Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SENIORS EQUITIES 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 NINETEENTH DAY OF FEBRUARY, A.D. 1999.

Edward J. Freel, Secretary of State

AUTHENTICATION:

__ 9587051

DATE: