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Document Number Only

C T CORPORATION SYSTEM

Requestor's Name  
660 East Jefferson Street

Address  
Tallahassee, FL 32301 (850)222-1092  
City State Zip Phone

CORPORATION(S) NAME

900002919769--7  
-06/30/99--01061--021  
\*\*\*\*285.00 \*\*\*\*285.00

Experior Assessments, LLC

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99 JUN 30 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ☐ Profit  
☐ NonProfit  
☒ Limited Liability Company  
☐ Foreign

- ☐ Amendment  
☐ Dissolution/Withdrawal

- ☐ Merger  
☐ Mark

- ☐ Limited Partnership  
☐ Reinstatement  
☐ Limited Liability Partnership  
☐ Certified Copy

- ☐ Annual Report  
☐ Reservation  
☐ Photo Copies

- ☐ Other  
☐ Change of R.A.  
☐ Fictitious Name  
☐ CUS

- ☐ Call When Ready  
☒ Walk In

- ☐ Call if Problem  
☐ Will Wait

- ☐ After 4:30  
☒ Pick Up

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THANKS  
JOEY

99 JUN 30 AM 11:25

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# 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. Experior Assessments, LLC  
(Name of foreign limited liability company must end with the words "limited liability company" or "limited company" or their abbreviations "L.L.C." or "L.C." if not so contained in the name at present.)
2. Delaware 3. Applied For  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. October 1, 1998 5. December 31, 2028  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon acceptance of application  
(Date first transacted business in Florida. (See sections 608.501, 608.502 and 817.155, F.S.))
7. 254 South 600 East Street, Salt Lake City, Utah 84102

(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:	NAME & ADDRESS:	TITLE:
<u>see attached addendum</u>	<u>_____</u>	<u>Kevin Bueggeman</u>	<u>COO</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
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<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>

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.)

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## **ADDENDUM**

### **Member A Managers**

Chris Hoehn-Saric  
Steve Hoffman  
Bruce Davis

254 South 600 East, Salt Lake City, Utah 84102  
254 South 600 East, Salt Lake City, Utah 84102  
254 South 600 East, Salt Lake City, Utah 84102

### **Member B Managers**

Judith Moore  
Steve Koefler  
Michael Fitton

254 South 600 East, Salt Lake City, Utah 84102  
254 South 600 East, Salt Lake City, Utah 84102  
254 South 600 East, Salt Lake City, Utah 84102

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## **ATTACHEMENT**

To engage in the business of developing and administering state and municipal sponsored licensing and certification programs for adults and other related services. The business is contracted with the local, state, county or municipal government in the United States.

To engage in any other lawful act or activity which may be carried on by a limited liability company, which the Members may from time to time authorize or approve pursuant to the provision of the operating agreement of Experior Assessments, LLC.

06/25/99 22:49 FAX  
JUN-24-1999 16:28

C T CORPORATION WASH DC

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002  
P.02/02**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS**

The undersigned member or authorized representative of a member of  
EXPERIOR ASSESSMENTS, LLC deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 1,000,000
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 3,099,496. A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is \$ 4,099,496. This total includes amounts from 2 and 3 above.

*Kevin Buapeman, President & CEO*

Signature of a member or authorized representative of a member.

(In accordance with section 608.402(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**FILING FEE: \$250 for Articles of Organization and Affidavit**

PROJECT System Online

TOTAL P.02

## Experior Member contributions to LLC

Office Equipment  
A/D Office Equipment  
Furniture & Fixtures  
A/D Furniture & Fixtures  
Leasehold Improvements  
A/D Leasehold Improvements  
Computer Equipment  
A/D Computer Equipment  
Capital Leases  
A/D Capital Leases  
Total Fixed Assets

Total Property

137,589
137,585
320,350
2,340,582
239,141
3,095,498

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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: Exterior Assessments LLC

2. The name and address of the registered agent and office is:

C T Corporation System

(Name)

c/o C T Corporation System, 1200 South Pine Island Road

(P.O. Box not acceptable)

Plantation, Florida 33324

(City/State/Zip)

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*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.*

Connie Bryan

(Signature)

June 28, 1999

(Date)

**CONNIE BRYAN**  
**SPECIAL ASSISTANT SECRETARY**

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 "EXPERIOR ASSESSMENTS, 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 TWENTY-NINTH DAY OF JUNE, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

FILED  
99 JUN 30 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



  
Edward J. Freel, Secretary of State

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AUTHENTICATION: 9837532

DATE: 06-29-99