

REFERENCE: 296340

7166314

AUTHORIZATION :__

COST LIMIT : \$ PP

ORDER DATE: July 2, 1999

ORDER TIME: 2:15 PM

ORDER NO. : 296340-005

CUSTOMER NO: 7166314

CUSTOMER: Ms. Maggie Evans

Cfl, Llc ...

725 N. Derby Lane

P.o. Box 1550

North Sioux Cit, SD 57049

FOREIGN FILINGS

800002922798---07/0<u>6/9</u>9--01001--010 ****293.75 ****293.75

NAME: CFL, L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING _

CONTACT PERSON: Christine Lillich

Katherine Harris Secretary of State

July 12, 1999

CSC

RESUBMIT

SUBJECT: CFL, L.L.C. Ref. Number: W99000015472 Please give original submission date as file date.

We have received your document for CFL, L.L.C. and your check(s) totaling \$293.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist

Letter Number: 899A00035818

59 JUL 13 A

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:

ntained in the na	outh Dakota	,		46-0448210		job ² ,
liction under the my is organized)	law of which foreign l	imited liability	». —	(FEI number, if ap	plicable)
	pril 29, 199	8 4	5	perpetual		***************************************
(Date o	f Organization)		ex	uration: Year limited liability ist or "perpetual")	compai	ny will cease
	uly 1, 1999	a in Florida (Cos		ns 608.501, 608.502, and 817	155 E	<u> </u>
•	nrst transacted busines /25 North Deri	,	e secuo	ns 008.501, 008.502, and 817	.1 <i>33</i> , F.	s. <i>)</i>
, ,,,,,,,,,,						
<u>P</u>	North Sioux C	(Street address		cinal office)		
nanage the for	d business address deign limited liability ADDRESS:	of each manag	ing m	ember[MGRM] or mana da: (attach additional pag NAME & ADDRESS:	ger[Mo	GR]who cessary)
nanage the for	eign limited liabili	of each manag ty company in	ing m	da: (attach additional pag NAME & ADDRESS: William D. Sapp	ge if ne	cessary)
NAME of Timo	eign limited liabilit ADDRESS:	of each manag ty company in TITLE:	ing m Florio	da: (attach additional pag	e if ne	cessary) TITLE:
NAME of Timo	eign limited liabilite ADDRESS: thy Jones	of each manag ty company in TITLE:	ing m Florio	da: (attach additional pag NAME & ADDRESS: William D. Sapp 9915 S. 148th S	e if ne	cessary) TITLE:
NAME of Timo 725 Nort	eign limited liabilite ADDRESS: thy Jones	of each manag ty company in TITLE:	ing m Florio	da: (attach additional pag NAME & ADDRESS: William D. Sapp 9915 S. 148th S	e if ne	cessary) TITLE: Member
NAME of Timo 725 Nort	eign limited liability & ADDRESS: thy Jones N. Derby Lane h Sioux City,	of each manag ty company in TITLE: Member: SD 57049	ing m Florio	da: (attach additional pag NAME & ADDRESS: William D. Sapp 9915 S. 148th S Omaha, NE 68145	e if ne	TITLE: Member Member
NAME Timo 725 Nort Alle	eign limited liability ADDRESS: thy Jones N. Derby Lane h Sioux City, n J. Marsh	of each manag ty company in TITLE: Member: SD 57049	ing m Florio	da: (attach additional pagents) NAME & ADDRESS: William D. Sapperson 9915 S. 148th Somaha, NE 6814! Kathleen S. Jo	e if ne	Member
NAME Timo 725 Nort Alle	teign limited liability ADDRESS: thy Jones N. Derby Lane h Sioux City, n J. Marsh S. 148th St	of each manag ty company in TITLE: Member: SD 57049	ing m Florio	da: (attach additional pagenta: (attach additional pagenta: (attach additional pagenta: (attach & ADDRESS: William D. Sapperson	e if ne	Member
NAME Timo 725 Nort Alle	teign limited liability ADDRESS: thy Jones N. Derby Lane h Sioux City, n J. Marsh S. 148th St	of each manag ty company in TITLE: Member: SD 57049	ing m Florio	da: (attach additional pagenta: (attach additional pagenta: (attach additional pagenta: (attach & ADDRESS: William D. Sapperson	e if ne	Member

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.)

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.

C:	EL, L.L.C.	
. The name and	d the Florida street address	of the registered agent and office are:
	Corporation Serv	vice Company
		(Name)
	1201 Hays Stre	et -
	Florida street add	iress (P.O. Box NOT ACCEPTABLE)
:	Tallahassee	-FL 32301
•		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.

Soura R. Dung

99 JUL -2 MM 9: 11
SECRETARY OF STATE
TAIL LANASSEE, FLORIC

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 of	
CfL, L.L.C. certifies:	Ø _k
1) the above named limited liability company has at least one member;	
2) the total amount of cash contributed by the member(s) is $\frac{1}{1}$	\$ 494,700
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 (This total includes amounts from 2 and 3 above.)	\$ <u>766,850</u> .
Signature of a mambar are the signat	
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.)	oer.
Kathleen S. Jones	
Typed or printed name of signee	•

Filing Fee: \$250.00 for Application and Affidavit

99 JUL -2 AM 9: 12



OFFICE OF THE SECRETARY OF STATE

Certificate of Existence Limited Liability Company

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, do hereby certify that CFL, L.L.C. was duly organized under the laws of this state on April 29, 1998 for a perpetual term of existence.

I, further certify that said Limited Liability Company has complied with the laws of this State relative to the formation of Limited Liability Companies of its kind and is now a regularly and properly organized and existing Limited Liability Company under the laws of this State and is in good standing, as shown by the records of this office. The annual report required by law has been filed with our office and articles of termination have not been filed. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the Limited Liability Company's financial condition or business activities and practices. Such information is not available from this office.

\$500 m

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this June 11, 1999.

Joyce Hazeltine Secretary of State