CCRS **		
103 N. MERIDIAN STREET,	LOWER LEVEL	
TALLAHASSEE, FL 32301		b
222-1173		INN
FILING COVER SHEET	NIA	
	MATANON	$M / M \gamma$
ACCT. #FCA-14	*/	0/085
	1110000	
/	· C	_
CONTACT:	CINDY HICKS	2000029306824 07/14/9901026005
	7-14-99	****293.75 ****293.75
DATE:	1-14-11	- 2000029306824
	031/ 1	-07/14/9901026004
REF. #:	0345.7566	*****52.50 *****52.50
	· · > · >	1 1 1 0
CORP. NAME:	Insite Palm Be	each, L.L.C
		_
() ARTICLES OF INCORPORAT	ION () ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION
		K () FICTITIOUS NAME
ANNUAL REPORT	() TRADEMARK/SERVICE MARK	37 $32 - 2$
(X) CERT. OF AUTHORITY	() LIMITED PARTNERSHIP	
) REINSTATEMENT	() MERGER	() WITHDRAWAL
() CERTIFICATE OF CANCELL	ATION () UCC-1	() vcc-3
() OTHER:		<u> </u>
,		
	4922	293 75%
	j-01/	
STATE FEES PREPAI	D WITH CHECK# <u>り374</u>	FOR \$ 54.50
AUTHORIZATION FO	R ACCOUNT IF TO BE DEBI	ITED:
		### 3 #### 3
	COST	LIMIT: \$
PLEASE RETURN:	1.	
1/	Manager Charles	COLUMN CO
(CERTIFIED COPY	CERTIFICATE OF S	STATUS () PLAIN STAMPED COPY
/ -		_
		\mathcal{M}
		56214-97
Examiner's Initials		50 14-1'
		1 11

·- ·-

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

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

1. InSite Palm Beach				
(Name of foreign limited liability "L.C." if not so contained in the r	company must e name at present.	nd with th)	e words "limited company" o	r their abbreviation
2. Illinois		3/	Applied for	
(Jurisdiction under the law of whilability company is organized)			(FEI number, if appli	cable)
4. 7 – 2 (Date of Organic	-1999	5	Perpetual	
(Date of Organi:	zation)	(Duration: Year limited liabilit ease to exist or "perpetual")	
6. date of filing				
(Date first transacted bu	siness in Florida	(See sec	tions 608.501, 608.502, and	817.155, F.S.)
7. <u>1603 West S</u>	ixteenth Stre	et		
Oak Brook,	Ilinois 6052			
	(Street addre	ss of pr	ncipal office)	
8. List name, title, and imanager [MGR] who was additional page	will manage t		each managing mem gn limited liability com	
NAME & ADDRESS:	TITLE:		NAME & ADDRE	SS: TITLE:
Gerald J. Kostelny	MGR_			
1603 W. Sixteenth Street				<u>. </u>
Oak Brook, IL 60523				
Robin Rash	<u>MGR</u>			ALLIA SECH
1603 W. Sixteenth Street	-		<u> </u>	F F
Oak Brook, IL 60523				ILED ILED IRY OF SI SSEE, FLO
David E. Cunningham	<u>MGR</u>			
1603 W. Sixteenth Street				
Oak Brook, IL 60523				

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

	indersigned member or authorized representative of a member of the Polymers of the Control of the Polymers of the Control of the Polymers of the Control of the Polymers of th				
11131	ite Palm Beach, L.L.C.	_ deposes and says:			
1)	the above named limited liability company has at least two memb	ore			
۱)	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	_			
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	de a part hereto.			
4)	the total amount of cash or property anticipated to be contributed	by member(s) is			
	\$ 1,000 . This total includes amounts from 2 and 3 above.				
	Robin Rash	· · ·			
	Signature of a member or authorized representative of	f 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.)

99 JUL 14 AM II: 17 SEGNLTARY OF STATE

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.

i.	The name of the limited liability company is:
	InSite Palm Beach, L.L.C.
2.	The name and address of the registered agent and office is:
	NRAI Services, Inc.
	(Name)
	526 East Park Avenue (P.O. Box or Mail Drop 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.

(Signature),

iling Fee: \$35 for Designation of Registered Agent

99 JUL 14 AM II: 1 SECRETARY OF STAT



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

INSITE PALM BEACH, L.L.C.,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JULY 02, 1999,
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING
OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT
BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I, hereto set

Desse White

SECRETARY OF STATE