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

SFE CITRUS HOLDINGS, LLC			<u> </u>
(Name of foreign limited liability	company must end L.L.C." or "L.C." if	with the words "limited liability con not so contained in the name at prese	npany" or "limited ent.)
DELAWARE		59-3583661	
(Jurisdiction under the law of wh company is organized)		*	npany" or "limited ent.) licable)
JUNE 25, 1999	5.	PERPETUAL	
(Date of Organizati	on)	(Duration: Year limited liability cocease to exist or "perpetual")	ompany will
AUGUST 10, 1999			
(Date first transacte	d business in Florid	la. (See sections 608.501, 608.502 a	nd 817.155, F.S.)
c/o Pasco Acquisition, 400 North T	Famna Street		
Tampa, Florida 33602 Attn: Vice		lress of principal office)	
	(Street add	lress of principal office)	
List name, title, and business	(Street add	lress of principal office) managing member [MGRM] or pany in Florida: (attach addition	manager [MGR] val page if necessa
List name, title, and business	(Street add	managing member [MGRM] or	manager [MGR] value page if necessa
List name, title, and business will manage the foreign limit	(Street add address of each ted liability comp	managing member [MGRM] or oany in Florida: (attach addition	nal page if necessa
List name, title, and business will manage the foreign limit	(Street add address of each t ted liability comp	managing member [MGRM] or bany in Florida: (attach addition NAME & ADDRESS:	nal page if necessa
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List name, title, and business will manage the foreign limit NAME & ADDRESS: David Tegreene 250 Brigham Road Winter Haven, FL 33881 Lou Fouts East 34th Street, Apt #18-0	(Street add address of each sted liability compared to the state of th	managing member [MGRM] or bany in Florida: (attach addition NAME & ADDRESS: Robert A. Peiser 326 Lakewood Drive Bloomfield Hills, MI 48304 David Aplin 2439 Hollingworth Hill	nal page if necessa TITLE: MGMR -

^{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 1	undersigned member or authorized representative of a member of	9
SFE	CITRUS HOLDINGS, LLC certifies:	60
1) t	he above named limited liability company has at least one member;	4 5: Or
2) t	he total amount of cash contributed by the member(s) is	\$ <u>10,000.00</u> ;
(f 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.)	\$0-;
1	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.)	\$ 10,000.00
	Signature of a member or authorized representative of 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	<u></u>
ı	stated herein are true.) HARRY G. LEONARDI	

Filing Fee: \$250.00 for Application and Affidavit

Typed or printed name of signee

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.

1. The name of the Limited Liability Company is:

SFE CITRUS HOLDINGS, LLC

	C T Corporation System
	(Name)
	1200 South Pine Island Road
Flori	da street address (P.O. Box NOT ACCEPTABLE)
Plantation	FL 33324
	(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.

CT Corporation System

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
(Signature)

Filing Fee: \$35 for Designation of Registered Agent

State of Delaware

PAGE 1

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SFE CITRUS HOLDINGS, 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 NINTH DAY OF AUGUST, A.D. 1999.

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

Edward J. Freel, Secretary of State

AUTHENTICATION:

9911426

DATE:

08-09-99

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