Tampa

August 23, 1999

CERTIFIED RETURN RECEIPT REQUESTED

Secretary of State of the State of Florida Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re:

Vinings Trace, LLC

Our File No. 98-4295

M99-1354

Dear Sir:

Enclosed please find Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida together with our check in the amount of \$337.50 representing: \$250.00 filing fee for application and affidavit, \$35.00 filing fee designation of registered agent and \$52.50 certified copy fee. Please forward the certified copy to our office at the address set forth above.

If you have any questions, please do not hesitate to give me a call.

Very truly yours,

Stacy A. Hendry

Legal Assistant

/sah

Enclosure

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ETARY OF STATE
HASSEE FLORINA

-08/25/99--01089--004 ****337.50 ****337.50

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	A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSA	ACT BUSINESS IN THE .	STATE OF FLORIDA		÷	* *

	ontained in the name at present.)					
2	Indiana		3	36-4107014		
Juris	sdiction under the law of which foreign limited in some state of the second section of the second section in the second section is section.	ted liability	·	(FEI number, if applica	ble)	
•						
ļ	September 24, 1996	5	5	December 31, 2015		
	(Date of Organization)		· (Duration: Year limited liability comexist or "perpetual")	pany will cease	to to
).	April 21, 1999					
·		Florida. (See	secti	ons 608.501, 608.502, and 817.155,	F.S.)	
, <u> </u>	400 Broadway				-	
·	Cincinnati, Ohio 45202-334	1				
			of pri	ncipal office)		<u> </u>
	(6	idect admiss (or bar	noipar orrico)		
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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 eath of the translator must be submitted.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of	of a member of
VININGS TRACE, LLC	_certifies:
1) the above named limited liability company has at least	st one member;
2) the total amount of cash contributed by the member(s	\$\ 24,850,000.00
3) if any, the agreed value of property other than cash co (A description of the property is attached and made a and	
4) the total amount of cash and property contributed and by member(s) is (This total includes amounts from 2 and 3 above.)	anticipated to be contributed \$_24,850,000.00
VININGS TRACE, LLC BY: THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY Managing Member Signature of a member or an authori (In accordance with section 608.408(3), Floric affidavit constitutes an affirmation under the p stated herein are true.) BY: D. J. Wuebbling, Senior BY: Thomas M. Stapleton, ic	da Statutes, the execution of this penalties of perjury that the facts Vice President Wice President

Filing Fee: \$250.00 for Application and Affidavit

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 Co	mpany is:	· · · -	··· ·	*** · · · · · · · · · · · · · · · · · ·
VININGS TR	ACE, LLC			·	
2. The name an	d the Florida street addre	ess of the registered age	nt and office are:		
	William G. Scot	t		99 AUG SEGRE TALLAI	7
		(Name)		- 175 P. S.	
		y Blvd. Suite 2700 address (P.O. Box <u>NOT</u> Acc		PH 1:43 SEE FLORIDA	9
	Tampa,	FL 3	3602	A	· <u>-</u>
		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)

Filing Fee: \$ 35 for Designation of Registered Agent

STATE OF INDIANA

OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the limited liability company records and the proper official to execute this certificate.

I further certify that records of this office disclose that

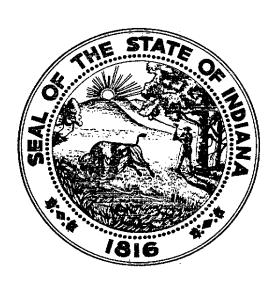
VININGS TRACE, LLC

filed Articles of Organization effective September 24, 1996, and is a limited liability company duly organized and existing under the laws of the State of Indiana.

I further certify this limited liability company has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.

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In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Nineteenth day of August, 1999.



Sue annu Hillay (
SUE ANNE GILROY, Secretary of State