: F9700006017

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: LAPSON RESULTING (Name of corporation)	ty INC,
(Name of corpo	ration - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence", and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida", to register the above referenced foreign corporation to
Please return all correspondence concerning this man RICK LARS (Nam LARSON RETURN) (Firm	100002347261—— atter to the following: -11/14/97—01013—024 ******70.00 ******70.0
(Nam	e of Person)
LARSON PER	gery INC.
(Firm	/Company) /Company) /F PO. BOX IS /COMPANSE 750 Address) /ORDOBA CIR. NA /State/Zip)
PO BOX 103	173 (UNACEDIAN & 750
(A	Address) CORDOBA CIR. NA
NAPLOS FLORI	DA 34/01 PLA.
(City	/State/Zip)
	-
Should you need to call someone concerning this ma	atter, please call:
RICK LARSON at 94	1,513-9112
(Name of Person) (A	rea Code & Daytime Telephone Number)
COURIER ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
	AH 8: 2

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned RICK LARSON, do hereby certify (Name) That this Resolution of the Board of Directors of LARSON REALTY	
I, the undersigned (Name), do hereby certify	
that this Resolution of the Board of Directors of CARSON KEALTY	
INC.	
(Corporate Name)	
a corporation duly organized and existing under the laws of the State of	
was duly adopted on APRIL 13 , 19 90. Be it resolved, that LARSON POALTY OF COMPANY NAME)	-
Be it resolved, that LARSON POALTY OF COMPANY (Corporate Name)	C
organized and existing in the State of	
LARSON REALTY OF CHICAGO for use in Florida.	
Dated: 11-11-97	
Signature of eigher Chairman or any officer	1
AM 8: 33	Ē
Type or print name	

INH519(4/96)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) 36-380 3678 (FEI number, if applicable) (State or country under the law of which it is incorporated) QUALIFICATION (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Current mailing address) Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Office Address: 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. (Registered agent's signature)

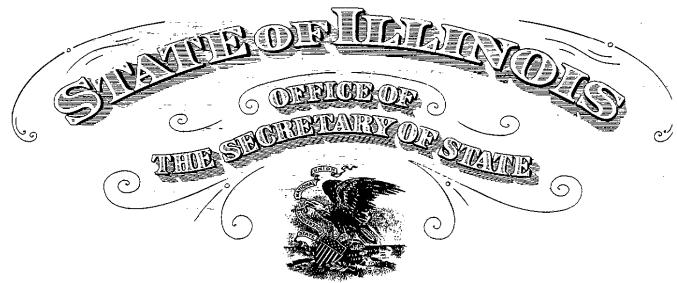
12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

of which it is incorporated.

11. Attached is a certificate of gastence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law

Chairman:				No. Allaborated	4		
			-				
Vice Chairman	:						
Address:							
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Director:				<u> </u>	<u> </u>		
Address:							
				<u> </u>			
Director:	/	·- <u>-</u>	<u> </u>		<u> </u>		
Address:					<u> </u>		
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resident:		Longor		ptable)			
Address:		7509		4 (10	Napres		301120
	//	7 M		SK.			<u> </u>
Vice President:		1/2	Con	o Propier	OK SMIP	no i	OTHER
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					70,000		
OTE: If neces	ssary, you ma	y attach an addend	lum to the applica	tion listing additi	onal officers and/or o		
	(Si - +						
•	(Signature of	Chairman, Vice C	nairman, or any o	officer listed in m	umber 12 of the appli	cation)	
l		(Typed or pri	nted name and car	pacity of person s	igning application)		<u> </u>

File Number 5592-492-9



To all to whom these presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,

do hereby certify that

LARSON REALTY, INC., A DOMESTIC CORPORATION,
INCORPORATED UNDER THE LAWS OF THIS STATE APRIL 13, 1990, APPEARS
TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS
CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL
REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DAME, IS IN
GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF TELINOIS***

STATE OF STATE STORE STORE STATE STA



In Cestimony:	Mhereof, -	b hereto	set
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my hand and cause to be affixed the Great Seal of the State of Illinois this _______30TH

day of _____OCTOBER _____ A.D., 19_97_

George H Ryan SECRETARY OF STATE