

F950000000192

Lexis

(Requestor's Name)

(Address)

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

700001380617
-01/13/95--01057--047
*****70.00 *****70.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ECD-Arbor Lakes, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

FILED
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DIVISION OF CORPORATIONS
95 JAN 12 PM 12:31

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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:

1. ECD- Arbor Lakes, Inc.
(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.)

2. Illinois 3. Applied For
(State or country under the law of which it is incorporated) (FEL number, if applicable)

4. 11-4-94 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 2055 Army Trail Road, Suite 138
Addison, IL 60101

(Current mailing address)

8. Property management and the transaction of any or all lawful business for which
corporations may be incorporated under the Florida General Corporation Act
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: CT CORPORATION SYSTEM

Office Address: c/o CT Corporation System, 1200 South Pine Island Road
Plantation, Florida, 33324
(Zip Code)

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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.*

[Signature]
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 60 days prior to
delivery of this application to the Department of State, by the Secretary of State or other officer
having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A DIRECTORS

Chairman: N/A

Address: _____

Vice Chairman: N/A

Address: _____

Director: Gerald M. Greenberg

Address: 2055 Army Trail Road

Addison, IL 60101

Director: Scott D. Greenberg

Address: 2055 Army Trail Road

Addison, IL 60101

B. OFFICERS

President: Gerald M. Greenberg

Address: 2055 Army Trail Road

Addison, IL 60101

Vice President: Scott D. Greenberg

Address: 2055 Army Trail Road

Addison, IL 60101

Secretary: Scott D. Greenberg

Address: 2055 Army Trail Road

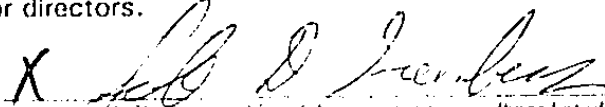
Addison, IL 60101

Treasurer: Gerald M. Greenberg

Address: 2055 Army Trail Road

Addison, IL 60101

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. X  _____
(Signed as CHAIRMAN, Vice Chairman, or any officer listed in number 12 of the application)

14. Scott D. Greenberg, Vice President
(Typed or printed name and capacity of person signing application)

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File Number 5805-087-3



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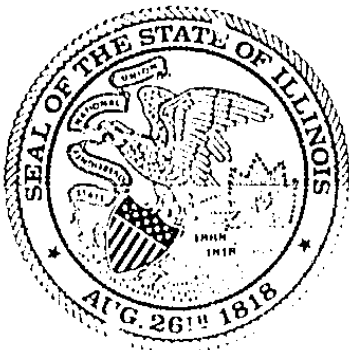
To all to whom these presents shall come, Greeting,

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

do hereby certify that

ECD - ARBOR LAKES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE NOVEMBER 4, 1994, 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 DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois this _____ 7TH day of _____ NOVEMBER A.D. 19 94



George H Ryan
SECRETARY OF STATE