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Deposit Account Enter for payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: # 01-0850 Authorization to charge additional fees: Yes No Statement and Signature To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein. Charles L. Miller	Fee Amount	Fee Am	ount for Properties	Listed (37 CFR 3.41)): \$ 1,640.00		
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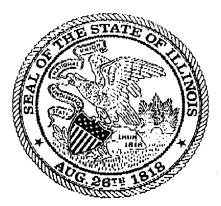
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To all to whom these Presents Shall Come, Greeting:

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

HAVING REGISTERED IN THE STATE OF ILLINOIS ON SEPTEMBER 1, 1994 (REGISTERED LIMITED LIABILITY PARTNERSHIP NAME CHANGED FROM ANDERSEN CONSULTING LLP ON JANUARY 01, 2001), APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE UNIFORM PARTNERSHIP ACT OF THIS STATE RELATING TO THE FILING OF THE APPLICATION FOR REGISTRATION OF DOMESTIC LIMITED LIABILITY PARTNERSHIP AND PAYMENT, AND IS REGISTERED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.*



RECORDED: 02/06/2001

In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this _____ day of ______ JANUARY A.D. 2001

SECRETARY OF STATE

C-260.1

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