Filing Fee: \$150.00

ID Number:



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

(To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-16-49 of the General Laws, I956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The name of the limited liability company is: LFA, Limited Liability Company		
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:		
3.	The limited liability company is organized under the laws of Indiana		
4.	The date of its organization is May 11, 2000		
5.	The period of duration of the limited liability company is (if perpetual, so state) perpetual		
6.	The address of the limited liability company's resident agent in Rhode Island is:		
	170 Westminster Street, Suite 900, Providence ,RI 02903		
	(Street Address, <u>not</u> P.O. Box) (City/Town) (Zip Code)		
	and the name of the resident agent at such address is Corporation Service Company (Name of Agent)		
7.			
•	(Name of Agent) The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable		
•	(Name of Agent) The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited		
7. 8.	(Name of Agent) The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:		
•	(Name of Agent) The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:		
8.	(Name of Agent) The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is: 200 East Berry Street, Fort Wayne, IN 46802-2706		

Form No. 450 Revised: 01/99 10. The limited liability company is to be managed by:

(Check one box only

its members	or XX by one (1) or more managers
 If the limited liability company has manage each manager: 	gers at the time of filing this application, please list the name and address of
<u>Manager</u>	<u>Address</u>
J. Michael Hemp, President	350 Church Street, Hartford, CT 06103-1106
Lucy D. Gase, Vice Presiden	t 200 East Berry Street, Fort Wayne, IN 46802-2706
Matthew Lynch, VP and CFO	200 East Berry Street, Fort Wayne, IN 46802-2706

Eldon Summers, Treasurer
 Cynthia A. Rose, Secretary
 Trina A. Mills, Asst. Sec.
 200 East Berry Street, Fort Wayne, IN 46802-2706

Janet Sumney, Asst. Sec. 200 East Berry Street, Fort Wayne, IN 46802-2706

Janet Sumney, Asst. Secretary 1300 S. Clinton Street, Fort Wayne, IN 46801

12. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 6/5/2000

LFA, LIMITED LIABILITY COMPANY

Print/Exact Name of Limited Liability Company Making Application

Rv.

Signature of authorized person

Lucy D. Gase, Vice President (Manager)

JUH 0 7 2000

7)nn 244890

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

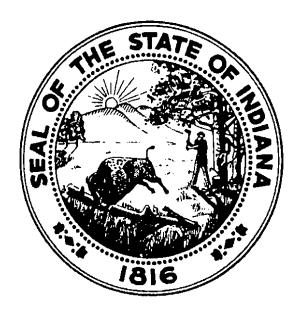
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

LFA, LIMITED LIABILITY COMPANY

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on May 11, 2000, and was in existence or authorized to transact business in the State of Indiana on May 17, 2000.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Seventeenth Day of May, 2000.

Sue ann Gillag

SUE ANNE GILROY, Secretary of State