

ACCOUNT NO. : 072100000032

REFERENCE: 508560 7222472

AUTHORIZATION :

COST LIMIT :

ORDER DATE: April 2, 2002

ORDER TIME : 9:30 AM

ORDER NO. : 508560-020

CUSTOMER NO: 7222472

CUSTOMER: Ms. Lucinda Lang

Carlton Fields Ward Emmanuel 000005191990--0

Suite 4000

100 Southeast Second Street

Miami, FL 33131

FOREIGN FILINGS

NAME: OLD BRIDGE PARK, LLC

XXXX	QUALIFICATION	(TYPE:	LL)

Name Availability LEASE RETURN THE FOLLOWING AS PROOF OF FILING: Document CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING Updater -Updater Susie Kmight -- HAL...
EXAMINER: Verifyer CONTACT PERSON: **Acknowledgement** DUC W. P. Verifyer LUCC

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of foreign	n limited lightlites and and
	n limited liability company)
Delaware	3. 61-1404220
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
12/06/01 (Date of Organization)	5. <u>12/05/51</u>
	(Duration: Year limited liability company will cease to exist or "perpetual")
2/10/02	
(Date first transacted business in Florida. (S	ee sections 608.501, 608.502, and 817.155, F.S.)
128 Captain John Smith	
Ft. Myers, FL 33917	
(Street address	ss of principal office)
If limited liability company is a manager-manage	
The usual business addresses of the managing me	mbers or managers are as follows:
Joel Schenkman	Old Bridge Park Corp.
10800 Lakeside Drive	
TOO THE DITAL	128 Captain John Smith
Coral Gables, FL 33156	
Coral Gables, FL 33156 Attached is an original certificate of existence, no more than 9	Ft. Myers, FL 33917 Odays old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language a
Coral Gables, FL 33156 Attached is an original certificate of existence, no more than 9 unisdiction under the law of which it is organized. (A photoco	Ft. Myers, FL 33917 Odays old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a bmitted)
Coral Gables, FL 33156 Attached is an original certificate of existence, no more than 9 urisdiction under the law of which it is organized. (A photocolation of the certificate under eath of the translator must be su	Ft. Myers, FL 33917 Odays old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a bmitted) or promoted in Florida:
Attached is an original certificate of existence, no more than 9 unisdiction under the law of which it is organized. (A photoxilation of the certificate under oath of the translator must be sure.) Nature of business or purposes to be conducted or	Ft. Myers, FL 33917 Odays old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a bmitted) or promoted in Florida:
Attached is an original certificate of existence, no more than 9 unisdiction under the law of which it is organized. (A photoxidation of the certificate under eath of the translator must be sure Nature of business or purposes to be conducted of Operation of Old Bridge Village, a more signature of a member or an automatical description.	Ft. Myers, FL 33917 Odays old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a bmitted) or promoted in Florida: bile home park uthorized representative of a member. F.S., the execution of this document constitutes
Attached is an original certificate of existence, no more than 9 urisdiction under the law of which it is organized. (A photoxidation of the certificate under eath of the translator must be sure Nature of business or purposes to be conducted of Operation of Old Bridge Village, a more Signature of a member or an au (In accordance with section 608,408(3), 1)	Ft. Myers, FL 33917 Odays old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a bmitted) or promoted in Florida: bile home park uthorized representative of a member. F.S., the execution of this document constitutes jury that the facts stated herein are true.)

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 Company is:	
OLD BRIDGE PARK, LLC	
2. The name and the Florida street address of the registered agent and office are:	02 APR SECRET TALLAH
JOEL SCHENKMAN (Name)	R-4 HARY
10800 LAKESIDE DRIVE	PM 1: (
Florida street address (P.O. Box NOT ACCEPTABLE)	39 310A
10800 LAKESIDE DRIVE	. ⊅≥ ພ

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 as provided for in Chapter 608, F.S.. NRAI Services, Inc.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OLD BRIDGE PARK, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF APRIL, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

02 APR -4 PM 1:39
SECRETARY OF STATE
TALL AHASSEF, FLORIDA



Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1698572

DATE: 04-02-02

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