

M03000000516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

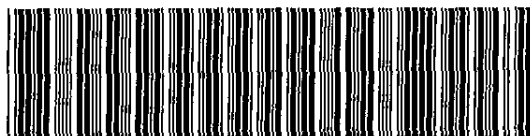
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 FEB 11 AM 11:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

BK

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE: 2038088-8  
(Sub Account)

DATE: 2/11

REQUESTOR NAME: Lexis Document Service

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: (\_\_\_\_) (\_\_\_\_-\_\_\_\_) ext (\_\_\_\_)

CONTACT NAME: \_\_\_\_\_

CORPORATION NAME: Equity Office Management, LLC.

DOCUMENT NUMBER: \_\_\_\_\_  
(if applicable)

AUTHORIZATION: Cynthia J. Woodyard

*File!*  
30  
FEB 11 PM 1:42  
FILED  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*125.00*

- CERTIFIED COPY (1-9)
- CERTIFICATE OF STATUS (1-2)
- PLAIN STAMPED COPY

- ( ) Call When Ready
- ( ) Walk In
- ( ) Mail Out
- ( ) Call if Problem
- ( ) Will Wait
- ( ) After 4:30
- ( ) Pick Up



**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.

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TALLAHASSEE, FLORIDA

1. The name of the Limited Liability Company is:

Equity Office Management, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

Lexis Document Services Inc.

(Name)

3953 W.W. Kelley Road

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL 32311

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..*

*Anthony Emrich, not 944,  
Lexis*  
(Signature)

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

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EQUITY OFFICE MANAGEMENT, L.L.C." 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 TENTH DAY OF FEBRUARY, A.D. 2003.

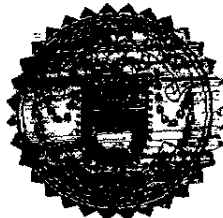
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EQUITY OFFICE MANAGEMENT, L.L.C." WAS FORMED ON THE TWENTY-THIRD DAY OF OCTOBER, A.D. 2001.

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

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SECRETARY OF STATE

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AUTHENTICATION: 2250077

*Harriet Smith Windsor*  
DATE: 02-10-03

Harriet Smith Windsor, Secretary of State