

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Fax Number : (850)205-0383

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Account Name : C T CORPORATION SYSTEM

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Phone Fax Number : (850)222-1092 : (850)222-9428

### FOREIGN LIMITED LIABILITY COMPANY

TA Cresthaven, LLC

Certificate of Status 0 Certified Copy 0 Page Count 04 5 \$125.00 Estimated Charge AL

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Sacretary of State

February 15, 2005

CT CORPORATION SYSTEM

SUBJECT: TA CRESTHAVEN, LLC

REF: W05000007755

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain the names and street addresses of the members or managers of the limited liability company.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist FAX Aud. #: H05000037992 Letter Number: 005A00010524

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. TA Creathaven, LLC (Name of Foreign Limited Liability Company) 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 5. Perpetual 4 February 10, 2004 (Duration: Year limited liability company will cease to exist or "perpensal") (Date of Organization) (Date the transacted business in Placida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) Military Trail . Wast Palm Boach (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original cartificate of existence, no more than 90 days old, duly authoriticated by the official having carebdy of records in the jurisdiction turnior the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a transition of the certificate under cash of the mandature must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florids; To own and operate real estate. Signature of a member or an authorized representative of a member. (In separation with section 608,408(3), F.S., the emeration of this document contributes an affirmation under the penalties of perjury that the facts stated herein are true.) Giles A. Birch, Authorized Person

Typed or printed name of signee

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#### SECRETARY OF STATE TALLAHASSEE, FLORIDA

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OPPICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Li	imited Liability Compa	ny is:		
TA Creathaven, LLC				
2. The name and the l	Florida street address o	f the registered a	gent and office are:	:
	C T Comporation System			·
		(Nazie)		
`* u .	1200 South Pine Island Road			
<del></del>	Florida Street Addre	# (P.O. Box <u>NOT</u>	ACCEPTABLE)	
	Plantation	FL	33324	<del></del>
		City/State/Zip		
Having been named as liability company at the agent and agree to act relating to the proper a obligations of my position.  By:  The state of the proper a control of the proper and a control of the proper a control of the p	: place designated in thi in this capacity. I furthe ind complete performan	s certificate, I her ir agree to compl ce of my duties, a	reby accept the appo y with the provision nd I am familiar wit	intment as registered t of all statutes h and accept the

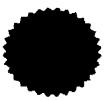
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)



## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO BEREBY CERTIFY "TA CRESTEAVEN, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO PAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF FEBRUARY, A.D. 2005.

3924730 8300 050112798



Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 3679282

DATE: 02-11-05