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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Barrett Place, LLC

Certificate of Status	0_
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JAN-10-2006 10:57

CT CORP

312 263 0124

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

IN COMPLIANCE WITH SECTION GOLDS, FLORIDA STATUTES, THE POLLOWING IS SURMITTED TO REGISTER A L'ORESCEN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. BARRETT PLACE, LLC (Name of Foreign Limited Liability Company) 2 DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) (FEI mumber, if applicable) PERPETUAL (Duration: Year limited fiability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florids, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 529 EAST SOUTH TEMPLE, SALT LAKE CITY, UT 84102 (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: LAWRENCE W. PINNOCK, 529 EAST SOUTH TEMPLE, SALT LAKE CITY, UT 84102 PATRICK BIENVENUE, 529 EAST SOUTH TEMPLE, SALT LAKE CITY, UT 84102 10. Attached is an original cutificate of existence, no more than 90 days old, duly authenticated by the official having custody of seconds in the judicition under the law of which it is organized. (A photocopy is not acceptable. Whe certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: REAL ESTATE AND ANY LAWFUL ACT OR ACTIVITY Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this accument committees on affirmation under the permittee of parjury that the facts stated borein are true.) MORTON M. STEINBERG, ESQ., AUTHORIZED REPRESENTATIVE Typed or printed name of signee

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1. The name of the Limited Liability Company is:

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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 POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

B	BARRETT PLACE, LLC		
2.	The name and the Florida street address of the registered agent and office are:		
	CT CORPORATION SYSTEM		
	(Namus)		
	1200 SOUTH PINE ISLAND ROAD		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	PLANTATION FIL 33324		
	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 appoinment 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, Florida Statutes.

By: James M. Halpin
(Signature) Assistant Socretary

\$ 109.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Sixtus (optional)

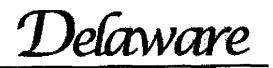
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "BARRETT PLACE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAMARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO PAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTE DAY OF JANUARY, A.D. 2006.

AND I DO BERESY FURTHER CERTIFY THAT THE AMBUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Hinds

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AUTHENTICATION: 4435868

DATE: 01-10-05