## 

CORPORATION(S) NAME

Summit Plan Apartments (Flo	orida), Inc.	TEST T
0		SALE SALES
		Property 5
		Sc 783
(X) Profit ( ) Nonprofit	() Amendment	() Merger
(X) Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark 50 の 日本
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Other FLET ATTAIN () Change of RA () UCC 22
() Certified Copy	() Photocopies	() CUS
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up
Name Availability Document Examiner	5/15/01	Order#: 4352364  OOOO42172502 -05/15/0101061010  Ref#: ******70.00 ******70.00
Updater Verifier W.P. Verifier	File Mist	Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 nustix

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA** IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBM REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA 1. Summit Palm Apartments (Florida), Inc. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) applied for Delaware (FEI number, if applicable) (State or country under the law of which it is incorporated) May 7, 2001 (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) 6. Upon filing. (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 1996 S. Kirk Street Suite 320 Geneva, Illinois 60134 (Current mailing address) 8. Business and purpose shall consist solely of the acquisition, ownership, operation and mangement of a real estate project (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) C T Corporation System Name: Office Address: 1200 South Pine Island Road Plantation 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. C T Corporation, System Jeffrey R. Graves Assistant Secretary

signature)

Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the

which it is incorporated.

<sup>12.</sup> Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FL019 - 9/2/99 C T System Online

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: Herbert Kollinger	<u>o,</u>
Address: 1996 S. Kirk Street Suite 320	文章 发
Geneva Illinois, 60134	1 5 Kg
Vice Chairman: Edwin Kollinger	The second
Address: 1996 S. Kirk Street Suite 320	07, 6
Geneva Illinois, 60134	9
Director: Erich Kollinger	
Address: 1996 S. Kirk Street Suite 320	
Geneva Illinois, 60134	
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: Herbert Kollinger	· · ·
Address: 1996 S. Kirk Street Suite 320	
Geneva Illinois, 60134	
Vice President:	<u> </u>
Address:	
Secretary: Thomas F. Brett II	· · · · · · · · · · · · · · · · · · ·
Address: 3500 Three First National Plaza	
Chicago Illinois 60602	
Treasurer: Erich Kollinger	
Address: 1996 S, Kirk Street Suite 320	
Geneva Illinois, 60134	<del> </del>
NOTE: If peressary, you may attach an addendum to the application listing additional officers and/officers an	
14. Thomas F. Brett, Secretary	- · · · <u> </u>
(Typed or printed name and capacity of person signing application	n)

## State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUMMIT PALM APARTMENTS (FLORIDA), INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF MAY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHESE TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 1129369

DATE: 05-11-01

3389208 8300

010228148