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CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	MAACOD, INC.				
	(Name of corporation: must include the word "INCORPO	ORATE	ED", "COMPANY", "CO	RPORATION" or	
	words or abbreviations of like import in language as wil	ll clearly	y indicate that it is a cor	poration instead of a	
	natural person or partnership if not so contained in the	name a	t present.)		
2.	TENNESSEE	3.	APPLIED 1	FOR	
	(State or country under the law of which it is incorporat	ed)	APPLIED 1 (FEI nur	nber, if applicable)	
		•	,	• • • • • • • • • • • • • • • • • • • •	
	0.000 ppp 00 1.622	_			
4.	OCTOBER 29, 1998	_ 5	(Duration: Year corp. w	<u>.</u> 	
	(Date of Incorporation)		(Duration: Year corp. w "perpetual")	The cease to exist or	
			perpetuar)		
6.	UPON QUALIFICATION				
	(Date first transacted business in Florida. (SEE SECT	rions 60	07.1501, 607.1502, AND	817.155, F.S.)	-
7.	165 MADISON AVERNUE SUITE 20 MEMOR	MTC 1		,	OF CORP
7.	165 MADISON AVEBNUE, SUITE 20, MEMPI	HIS,	TENNESSEE 38103		≥ -≥
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				-	4 4
	(Current mai	ling add	iress)	Ö	77
	•	J	,		<u></u>
_				AM	ं?⊊
8.	OWN AND OPERATE APARTMENT COMMUNITY (Purpose(s) of corporation authorized in home state or	LES		<u> </u>	<u> </u>
	(Purpose(s) or corporation authorized in nome state or	countr	y to be carried out in the	state of Florida) &	
9.	Name and street address of Florida registere acceptable)	d age	nt: (P.O. Box or Ma	il Drop Box <u>NOT</u>	10 m
				•	
	Name: C T Corporation System	m			
	Office Address: 1200 South Pine Island	l Road			
	Office Address:	•			
	Diamentian		· ·	22224	
	Plantation		, Florida,	33324	
1 /	. Registered agent's acceptance:			(Zip Code)	
ΙU	. Registered agent's acceptance.				
co rez ali	aving been named as registered agent and to rporation at the place designated in this apgistered agent and agree to act in this capacity. I statutes relative to the proper and complete ped accept the obligations of my position as regist	plicat I fur perforn	ion, I hereby acce; ther agree to compl; nance of my duties,	pt the appointme y with the provisio	nt as ons of
	(Registered ag	SI Ent's sig	UNINE BRYAN PECIAL ASSISTANT S mature)	ECBETARY	
11	. Attached is a certificate of existence duly auth delivery of this application to the Department official having custody of corporate records in	of Stat	e, by the Secretary of	of State or other	

incorporated.

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SECRETAR DIVISION OF
FILED ETARY OF STATE LOF CORPERATION
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12.	Names and addresses	of officers	and/or	directors:	(Street address	ONLY-P.	O. Box
	NOT acceptable)				`		

A. DIRECTORS (Street address only-P.O. Box NOT acceptable)

Chairman:	GEORGE E. CATES	_
Address:	165 MADISON AVENUE, SUITE 20, MEMPHIS, TENNESSEE 38103	
Vice Chair	rman: SIMON R. C. WADSWORTH	_
Address:	165 MADISON AVENUE, SUITE 20, MEMPHIS, TENNESSEE 38103	_
Director:	STEPHEN CARPENTER	_
Address:	165 MADISON AVENUE, SUITE 20, MEMPHIS, TENNESSEE 38103	_
Director:	HOWARD EDDINGS	
Address:	165 MADISON AVENUE, SUITE 20, MEMPHIS, TENNESSEE 38103	- - -
B. OFFI	CERS (Street address only- P. O. Box NOT acceptable)	8 OCT
President:	SIMON R. C. WADSWORTH	မ္
Address:		S Z
Vice Presi	ident:	2 7
Address:		_
Secretary	MARK S. MARTINI	_
Address:	165 MADISON AVENUE, SUITE 20, MEMPHIS, TENNESSEE 38103	_
Treasurer		
Address:		_
NOTE: I officers a	f necessary, you may attach an addendum to the application listing additional and/or directors.	
13(Si	Massem Ignature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	_
14	MARK S. MARTINI, SECRETARY (Typed or printed name and capacity of person signing application)	

Secretary of State Corporations Section James K. Polk Building, Suite 1800 Nashville, Tennessee 37243-0306

ISSUANCE DATE: 10/29/1998 REQUEST NUMBER: 98302146 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 10/29/1998 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0359938 JURISDICTION: TENNESSEE

TO: BAKER DONELSON BEARMAN & CALDWELL CAROLINE JONES 511 UNION STREET NASHVILLE, TN 37219

REQUESTED BY:
BAKER DONELSON BEARMAN & CALDWELL CAROLINE JONES 511 UNION STREET NASHVILLE, TN 37219

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "MAACOD, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF INCORPORATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE CORPORATION HAVE BEEN PAID; THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 10/29/98

FEES \$160.00

RECEIVED:

\$0.00

BAKER DONELSON BEARMAN ETC (NASHVILLE)

TOTAL PAYMENT RECEIVED:

\$160.00

511 UNION ST SUITE 1700 NASHVILLE, TN 37219-0000

RECEIPT NUMBER: 00002381218 ACCOUNT NUMBER: 00208389



RILEY C. DARNELL SECRETARY OF STATE

SS-4458