÷ . •	F MODOOOS 5119	
	Registration Section Division of Corporations	
SUBJEC	T: <u>SUNSHINE APARTMENT</u> CORPORATION (Name of corporation - must include suffix)	

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

(Name of Person) MANAGEMENT & CONSTRUCTION Core (Firm/Company) AN IO: 701 NONDU (Address) 60115 (City/State/Zip)

Should you need to call someone concerning this matter, please call:

1000029793 -01063 *****87.50 *****87.50

KATHYLAINGat (815)7581100(Name of Person)(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount:

\$70.00 Filing Fee

Certificate of Status

\$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 15, 1999

CHARLES W. LAING LAING MANAGEMENT & CONSTRUCTION CORP. 701 LUCINDA DEKALB, IL 60115

SUBJECT: SUNSHINE APARTMENT CORPORATION Ref. Number: W99000021167

We have received your document for SUNSHINE APARTMENT CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

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Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

The document must have original signatures.

The document must be signed by the chairman, any vice chairman of the board $\stackrel{\sim}{\rightharpoonup}$ of directors, its president, or another of its officers.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

ACTION BY CONSENT OF SOLE DIRECTOR OF SUNSHINE APARTMENT CORPORATION

I, the undersigned, being the sole director of the above named Illinois corporation, do hereby take the following action without a meeting, pursuant to the authority granted in the Illinois Business Corporation Act:

RESOLVED:

That the Board of Directors hereby adopts the alternate name of Southern Oaks Apartments Corporation for its use in doing business in the State of Florida; and that the Corporation and its President are hereby authorized to apply for authorization to transact business in Florida and to transact business in the state of Florida under the alternate name of Southern Oaks Apartments Corporation.

No further action was taken on this date.

Dated: SEPTEMBER 24, 1999

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Charles W. Laing

being the sole director of the corporation

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. SUNSHINE APARTMENT CON	R PORATION
(Name of corporation; must include the word "INCORPOR	RATED", "COMPANY", "CORPORATION" or
words or abbreviations of like import in language as will c natural person or partnership if not so contained in the nam	learly indicate that it is a corporation instead of a
	ie a fregotte)
2. ILLINOIS	3. <u>36-4289764</u> (FEI number, if applicable)
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. April 27, 1999 5.	PERPETHAL
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. April 27, 1999	
(Date first transacted business in Florida. If corporation has 4/0 LAING, (SEE SECTIONS 607.15	s not transacted business in Florida, insert "upon qualification.") 501, 607.1502 and 817.155, F.S.)
7. a. 701 LuciNDA AVENUE, De KALB	ILLINDOIS 60115
(Principal office a	address)
b. SAME	
(Current mailing a	address)
— · · ·	_ · · · ·
8. FLORIDA APARTMENT COMPLEY	DWNED BY ILLINOIS CORPORATION
(Purpose(s) of corporation authorized in home state of	r 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)
Name: CHARLES W. LAING	, ,
Office Address: 13533 N. 1577	
TAMPA, FLORIDA	, Florida_33613
	(Zip code)
10. Registered agent's acceptance:	
in this upplication, a nerevy accept the appointment of register	of process for the above stated corporation at the place designated red ag int and agree to act in this eapacity. I further agree to r and comply 'e performance of my duties, and I am familiar with
Aprile	N. Ly Multo W. Log
(Registered agent's	signat

11. Attached is a certificate of existence duly authenticated, not for than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTOR	S
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Chairman: CHARLES W. LAING	
Address: 701 LUCINDA AUB.	
DEKARB, 12 60115	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: CHARLES W. LOING	TEL 99 DOT T
Address: 701 hucinisa	
De KALB 12 60115	TELLING FILLED
Vice President: Tim Royer	24 5
Address: 2766 COUNTRY CLUB LANE	
De KALB IL 60115	
Secretary:CHARLES LAING	
Address: 701 Lucinion	
DeKALB 12 60115	-
Treasurer: PATRICIA A. BAHEN	
Address: 326 EDWARD	······································
A Sycanger, 12 borns	
NOTE: If necessary you may attack an addendum to the application listing additional officers and/or	r directors.
12 Mint. Jacks	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	•
14. CHARLES W. LAINS, PRESIDENT	·····

(Typed or printed name and capacity of person signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that corporation, incorporated under the laws of this state april 22, 1999, Appears to have complied with all the provisions of the BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****************

In Testimony Whereof, I, hereto set



SECRETARY OF STATE