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To:

Division of Corporations
Fax Number : (850) 617-6383

L. SELLERS

From:

Account Name : HENDRY, STONER, CALANDRINO & BROWN, P.A.
Account Number : I20000000241
Phone : (407) 843-5880
Fax Number : (407) 425-7905

EXAMINER

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SECRETARY OF STATE
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

RINALDI AT 522, LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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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 following statement in designating the registered office/registered agent, in the State of Florida:

(1) The name of the limited liability company is **RINALDI AT 522, LLC.**

(2) The name and address of the registered agent and office is **Hendry, Stoner, Calandrino & Brown, P.A., 20 North Orange Avenue, Suite 600, Orlando, Florida 32801.**

Having been named as registered agent and to accept service of process for the above-named limited liability company at the place designated in this certificate, 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 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.

Dated: March 13, 2008

Hendry, Stoner, Calandrino & Brown, P.A.
By: *G. Steven Brown*
G. Steven Brown

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