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ACCOUNT NUMBER: REFERENCE: (Sub Account) DATE:	FCA000000005 2021139-1	
REQUESTOR NAME:_	LEXIS	•
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CORPORATION NAME:	Baycrest Apartmen	ts LLC
DOCUMENT NUMBER: (if applicable)		\$125°C)
AUTHORIZATION:	C. Woodeyand	
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February 4, 2000

LEXIS

SUBJECT: BAYCREST APARTMENTS, LLC

Ref. Number: W0000003208

We have received your document for BAYCREST APARTMENTS, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The entity's date of incorporation/organization must be listed in the document.

The docuemnt must include the period of duration, which may be perpetual.

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) 487-6025.

Trevor Brumbley Document Specialist

Letter Number: 900A00005800

FILED

SECRETARY OF TAILE

SHOWING SECRETARY OF THE STATE OF THE STATE

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A I IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Baycrest Apartments, LLC (Name of foreign limited liability company) 2. Illinois (Gurisdiction under the law of which foreign limited liability of (FEI number, if applicable) 4.
1. Baverest Apartments, LLC (Name of foreign limited liability company) 2. Illinois (Jurisdiction under the law of which foreign limited liability company is organized) 4. J-3]-00 (Date of Organization) 5. Oergetus' (Duration: Year limited liability company will cease to exist or "perpetual") 6. upon filing (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 7. 1500 Bay view Drive, Ft. Lauderdale, FL 33305 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 9. The usual business addresses of the managing members or managers are as follows: Sheffield Wolk 2401 N. 25th Ave. Franklin Fark, IL 60131 Allan R. Bachewicz 315 N.E. 3rd Ave. Ste 200 Ft. Lauderdale FL 33301 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, translation of the certificate under eath of the translator must be submitted.)
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11. Nature of business or purposes to be conducted or promoted in Florida:to_own_and_manage
- 1. Transact of outsides of purposes to be conducted of promoted in Fiorial:to_own_and_manage
rental property
A Million of Wall
Signature of a member or an authorized representative of
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes
an affirmation under the penalties of perjury that the facts stated herein are true.)
Sheffield Wolk
Typed or printed name of signee
Typed or printed name of signee

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

2. The name	and the Florida street	address of the	registered age	nt and office are:		
	Lexis Documen		Inc. Iame)			
	3953	WW	Kelle	1 Rd.		
	Florida street address (P.O. Box NOT ACCEPTABLE)					
	Tallahuss	e e	EI	32311		

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 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 as provided for in Chapter 608, F.S..

City/State/Zip

(Signature)

1. The name of the Limited Liability Company is:

Baycrest Aparments, LLC

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

File Number _____ 0037336-2



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

BAYCREST APARTMENTS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JANUARY 31, 2000, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, Is hereto set

day of ______ FEBRUARY A.D. 2000

Desse White