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R. David Massey
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Stanley E. McLeod†
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ATT-BRNEYS AT LAW, EA:
POST OFFICE BOX 2464
FAX 64-242-6469
GREENVILLE, SOUTH CAROLINA 29602

November 7, 2000

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

70000345777 -11/08/00--01084--0125 ****160.00 ****160.00

RE:

Shane W. Rogers
*Professional Association
†Certified Specialist Taxation

Application By Foreign Limited Liability Company For Authorization

To Transact Business in Florida & Certificate Of Designation of Registered Agent/

Registered Office - Image Properties, LLC

Dear Sir/Madam:

M-2331

Enclosed please find the Application and Certificate as referenced above along with a copy of the Certificate of Existence as issued by the South Carolina Secretary of State.

Also, we enclose our check for filing fees in the amount of \$160.00.

Please return a filed copy of the Application or other documentation to verify this filing to me.

As always, in the event you have any questions or comments, please do not hesitate to telephone the undersigned.

Very truly yours,

BROWN, MASSEY, EVANS, McLEOD & HAYNSWORTH, P.A.

Stanley E. McLeod

SEMc:crw Enclosures

cc:

Raymond Kearns, Esquire

Up

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

		IMA	GE PROPERTIES	, LLC			<u></u>	
		+	(Name of foreign l					
	South Carol	ina	1	3. <u>~</u>	58-2	シンン 5 3 FEI number, if	28 applicable)	
Jurisdict company	tion under the law is organized)	v of which foreig	n limited liability		(,	'El liumou, L	прриченого	
	March 13	3, 1996 Organization)	· · · · · · · · · · · · · · · · · · ·	5. (Di	January tration: Year	limited liabil	ity company w	ill cease to
	·	-		èxi	st or "perpet	ual")		
Ef	fective Date	of Filing			COO 501 (00.500 1.0	17 166 7 6 \	
			ess in Florida. (Se					
St	reet address	of princip	al office/Sou	ıth Ca	rolina: l	06 William	us St.,Gree	enville,56
						· · · · · · · · · · · · · · · · · · ·		
			(Street address	of princ	ipal office)			
_					. 540	D) (7	n (cn)	1 -
ist nan	ne, title, and bu	usiness addres	s of each manag	ging me	mber[MG	KMJ or man	ager[MGK]	wno
vill maı	nage the foreig	m limited liab	ility company in	ı Floric	la: (attach	additional pa	age if necess	ary)
		•						
	NAME & A	DDRESS:	TITLE:		NAME &	ADDRESS:	: TI	TLE:
	<u> </u>							
	J. KENNET	TH LUKE -	MANAGING ME	MBER				
	Address:	3295 River	Exchange Dr.	, Nore	ross, GA	30092		
							- 1 8	•
	GENE VI	enesky –	MANAGING M	EMBER			F. 3	1
	Address:	3295 Rive:	. Exchange Dr	., Nor	cross, GA	30092	3.5	
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9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

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.

1. The n	ame of the Limited Liab	bility Company is:				
Image Pr	operties, LLC					
2. The n	ame and the Florida stre	eet address of the registered agent and office are:				
	C T Corporation Sy	stem				
	(Name)					
	c/o C T Corporation	a System, 1200 South Pine Island Road	NON NON			
	Florida street address (P.O. Box NOT ACCEPTABLE)					
	Plantation	FL 33324	R P			
	1:00					
liability c	ompany at the place desig	agent and to accept service of process for the above gnated in this certificate, I hereby accept the appoint	tment as registered			

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..

C T Corporation System

MARY R. ADAMS ASSISTANT SECRETARY

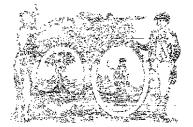
\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

The State of South Carolina



Office of Secretary of State Jim Miles Certificate of Existence

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

IMAGE PROPERTIES, L.L.C., A Limited Liability Company duly organized under the laws of the State of South Carolina on March 13th, 1996, has of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-43-901.1 of the South Carolina Code, and that the company has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 2nd day of November, 2000.

Jim Miles, Secretary of State