M000000002491

CT Corporation System 660 East Jefferson Street DATE: Tallahassee, FL 32301 850-222-1092 Corporation(s) Name Prim Residentical ()Amendment ()Profit ()Merger ()Nonprofit Foreign ()Dissolution ()Mark ILLC ()Withdrawal ()Limited Partnership ()UBR ()Other_ ()Reinstatement ()Fititious Name ()Ch. R ()UCC () 1 or () 3 ***Special Instructions** ()Photocopies ()Certified Copy ()arts/ameds/mergers () Other-See Above (XXX)Walk in (XXX)Pick-up

Please Return Filed Stamped Copies To:

Jeffrey Butterfield

Thank You!

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:

1.	Prime	Residential		-				
			(Name of fore	ign lim	ted liability company)			
2.	India	na	<u> </u>	3.	36-4287271			
(Ju	irisdiction i mpany is or	under the law of v rganized)	which foreign limited liabili	ty	36-4287271 (FEI number,	if applicable)		
4	April	13. 1999 (Date of Organi	zation)	5,	(Duration: Year limited lize exist or "perpetual")	ability company w	ill cease to	
De,	cember,	2000						
·· _		(Date first tran	sacted business in Florida.	(See se	ctions 608.501, 608.502, and	d 817.155, F.S.)		
7. <u>7</u>	7 West	Wacker Driv	e, Suite 4200, Ch	icago	. IL 60601			
_			(Street add	ress of	principal office)			
			·					
8. I	f limited l	liability compa	ny is a manager-mana	ged co	mpany, check here XX			
9. 7	The name	and usual busi	ness addresses of the r	nanag	ing members or manage	ers are as follow	vs:	
	See atta	ached docum	ent entitled, "Nur	nher	gii			
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10	A 44	i-ial acutifica	sta aCarriatan aa ma maana dha	00 da	un ald dalermakantiantadler	the official having		
					sys old, duly authenticated by s not acceptable. If the certifi			XOROS III.
			ath of the translator must be		<u>-</u>			
				_				
11.	Nature of	f business or p	irposes to be conducte	d or p	romoted in Florida: *	Managing and		,
	operati	ng multifam	ily residential c	ommui	nities and other r	eäl estate d	levelopme	ņts.
_			Chip!	1	~~~ , VP)	00 SEC	
		(In acco	ordance with section 608,408	(3), F.S.	orized representative o , the execution of this docume that the facts stated herein are	nt constitutes 🕏	00 DEC -6	
			Charles R	ŢŢ.	عال باب	77.9	4 5 P	
			Typed or pri	nted n	ame of signee	-STAT	PH 2:	IDVE!

NUMBER 9

Members

Addresses

Michael W. Reschke

77 West Wacker Drive, Suite 4200

Chicago, IL 60601

Gary J. Skoien

77 West Wacker Drive, Suite 4200

Chicago, IL 60601

Richard F. Cavenaugh

77 West Wacker Drive, Suite 4200

Chicago, IL 60601

John M. Peterman

1000 E. 80th Place, Suite 700

Merrillville, IN 46410

Dennis E. Kackos

1000 E. 80th Place, Suite 700

Merrillville, IN 46410

Craig A. White

1000 E. 80th Place, Suite 700

Merrillville, IN 46410

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

1.	. The name of the Limited Liability Company is:							
	Prime Residential, L.L.C.							
2.	The name and the Florida street address of the registered agent and office are:							
	CT Corporation System (Name)							
	1200 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE)							
	Titorida succi addices (1.0. Don <u>1.0.</u> 1.0021.							
	Plantation FL 33324 City/State/Zip							
	City/State/Zip							

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..

5.00

Jeffrey R. Graves Assistant Secretary

Filing Fee for Application \$ 100.00 Designation of Registered Agent \$ 25.00 Certified Copy (optional) \$ 30.00 Certificate of Status (optional)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

PRIME RESIDENTIAL, L.L.C.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on April 13, 1999, and was in existence or authorized to transact business in the State of Indiana on November 13, 2000.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Thirteenth Day of November, 2000.

SUE ANNE GILROY, Secretary of State

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