CT ORPORATION (S) NĀME

| Gunnvest, LLC | <u>-</u> | |
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| | | 1000038923917 -03/22/0101011032 *****125.88 ****125.00 |
| | | |
| () Profit () Nonprofit | () Amendment | () Merger |
| Foreign | () Dissolution/Withdrawal () Reinstatement | () Mark () Other () Change of RA |
| () Limited Partnership | () Annual Report | () Other |
| XILLC . | () Name Registration () Fictitious Name | () Ommercial () |
| Certified Copy | () Photocopies | Oucc Fig. 3 |
| () Call When Ready | () Call If Problem | () After 4:30 |
| (x) Walk In () Mail Out | () Will Wait | (x) Pick Up |
| () Man Out | | |
| Name Availability | 3/22/01 | Order#: 3875918AR 22 AH II: Ref#: Ref#: |
| Document | | Section 2 |
| Examiner | - · | Ref#: Ref#: Ref#: Ref#: Ref#: |
| Updater Verifier | | RATA = M |
| W.P. Verifier | • • | |
| ***** * OTILIOI | _ | Amount: \$ |

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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:

| | | ···· | | | |
|--|-------------------------|---|----------------------|--------------|---------------|
| Gunnvest, LLC | | <u></u> | · | | |
| (Name of for | eign lin | ited liability company | <u>)</u> | | |
| Georgia | | analia d C | | | |
| (Jurisdiction under the law of which foreign limited liabil | 3. | applied for | | | |
| company is organized) | HTY | (rein | umber, if applica | abic) | |
| 3-14-2001 | | _ | | | |
| (Date of Organization) | 5. | perpetual | | | |
| (or or grant out of | | (Duration: Year limexist or "perpetual" | ited liability com | apany will c | ease to |
| upon qualification | | 1 | | | |
| | 10 | <u>-</u> . | | | |
| (Date first transacted business in Florida. | (See se | ections 608.501, 608.5 | 02, and 817.155, | F.S.) | |
| 1051-H Johnnie Dodds Blvd. | | _ | | | |
| | ** | | <u> </u> | | = |
| Mount Pleasant, SC 29464 | | - | · — | | |
| (Street add | ress of | principal office) | | | - |
| YC41 1. 444 4 | | | | - 《免录》 | 3 |
| If limited liability company is a manager-manager- | ged co | mpany, check here | E | EL - | 므 |
| | | | | | - |
| The usual business addresses of the managing r | nembe | rs or managers are | as follows: | <u></u> | , 13 , 13 |
| | | | | 6 | 7 To |
| c/o James Doran Company, 1051-H Johnnie Dodds Blv | d., Mor | mt Pleasant, SC 2946 | <u> </u> | 7> | |
| | | • | | | |
| | | | | | |
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| | | | <u> </u> | | |
| | | | | | |
| | | | | · · · | |
| Attached is an original configura of minutes at | 00 Y | 44.44 | • | | . , , . |
| Attached is an original certificate of existence, no more than | 190day | s old, duly authemicate | d by the official h | avingcusto | dy of rec |
| turisdiction under the law of which it is organized. (A photo slation of the certificate under oath of the translator must be s | copys: | not acceptable. If the c | atificate is in a fo | reign langu | age, a |
| and the contraste uncer can of the translator must be s | Submille | a T) | | | |
| Nature of hysiness or average to be and | 1 | 4.4.* | . | | |
| Nature of business or purposes to be conducted | or pro | omoted in Florida: | Real Estate de | velopment | |
| | | | | | |
| | | | | | <u>.</u> |
| 1000 | r" | <u> </u> | , | | |
| Signature of a large | 4 | 1- | | • | |
| Signature of a member or an | author | nzed representativ | e of a member | r. · | |
| (In accordance with section 608.408(3) an affirmation under the penaltics of p | j, p.S., t Refluence | ne execution of this docu | ment constitutes | | |
| | ال والمارات. | ideis sibied beleit | नाट ग्रापटः) | | |

Greg W. Brooks, Asst Secretary of ESD Properties, Inc., sole Mgr of this LLC
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.

| Gimnvest, LLC 2. The name and the Florida street | address of the registered agent and offi- | се ате: | | |
|---|---|---------|-----|-------------|
| CT Corporation System | m | | | |
| | (Name) | | | |
| c/o C T Corporation Sy | stem, 1200 South Pine Island Road | | | |
| Florida s | street address (P.O. Box NOT ACCEPTABLE) | , | | |
| Plantation | FL 33324 | | | |
| | City/State/Zip | · | 1 . | r (*) - x* |

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.

CT Corporation System

(Signature)

TILED

11 MAR 22 PM 12: 42

SECRETARY OF STATE
ALLAHASSEE FLORID

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0112704
DATE INC/AUTH/FILED: 03/14/2001
JURISDICTION : GEORGIA
PRINT DATE : 03/20/2001

FORM NUMBER : 211 _

CT CORPORATION SYSTEM
PATTIE HARDY
1201 PEACHTREE STREET, N.E.
ATLANTA, GA 30361

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

GEORGIA LIMITED LIABILITY COMPANY

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Ally Coy

Cathy Cox Secretary of State