MOI 00000 1375

ACCOUNT NO. : 072100000032

REFERENCE: 191033 4326501

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: June 19, 2001

ORDER TIME : 11:09 AM

ORDER NO. : 191033-005

000004430330--3

-86/19/01--01082--002 ****160.00 ****160.00

CUSTOMER NO: 4326501

CUSTOMER: Ms. Pat Wood

Kennedy Covington Lobdell & Bank Of America Corporate Cntr 100 N. Tryon Street Suite 4200

Charlotte, NC 28202-4006

FOREIGN FILINGS

NAME: MCGREGOR/MCGUIRE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson -- EXT# 1155

EXAMINER:

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. McGregor/McGuire, LLC		
(Name of foreign lim	ited liability company)	AS 9
a avail of the	2	JUN I
2. North Carolina (Jurisdiction under the law of which foreign limited liability	(FEI number, if applicable)	37 7
company is organized)	•	FILED TARY OF
		E P
4. June 18, 2001	5. 2099 (Duration: Year limited liability comp	
(Date of Organization)	exist or "perpetual")	O=
	, particular to the second of	ATE
6. Upon qualification		<u> </u>
(Date first transacted business in Florida (See secti	ons 608.501, 608.502, and 817.155, F.S.)	
	Janth Carolina 28202	
7. 309 East Morehead Street, Suite 200, Charlotte, N	of principal office)	
(Datot address	ox primorpair variety	
8. If limited liability company is a manager-managed com	pany, check here	
o. II miniod habitaly tompany in the same of	•	
9. The name and usual business addresses of the managing	g members are as follows:	
Summit Properties Partnership, L.P.		
7007 171 101 101 101 1000		
309 East Morehead Street, Suite 200		
Charlotte, North Carolina 28202		
Charlotto, Profess Gardina 20202	All the second s	
10. Attached is an original certificate of existence, no more tha	in 90 days old, duly authenticated by the official	il having custody of
records in the jurisdiction under the law of which it is organized	d. (A photocopy is not acceptable. It the certification must be submitted.)	icate is in a foreign
language, a translation of the certificate under oath of the transl	ator must be submitted.y	
11. Nature of business or purposes to be conducted or	promoted in Florida: to own, develop,	improve, operate,
manage, lease and otherwise deal in various tracts or	parcels of land as the members shall f	rom time to time
determine, and to perform all activities incident thereto.		
11/1/1/10/10/11/11/1	m do	
_ vunta / lak		
Signature of a member or an aut	horized representative of a member.	

Michael G. Malone, Senior Vice President of Summit Properties Inc., which is the sole General Partner of Summit Properties Partnership, L.P.

Typed or printed name of signee

(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)

וויבט

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 THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

McGregor/McGuire, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company
(Name)

1201 Hays Street
Florida street address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL 32301
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..

BRIAN COURTNEY, ASST. V.P.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



NORTH CAROLINA

Department of The Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

MCGREGOR/MCGUIRE, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 18th day of June, 2001, with its period of duration ending 12-31-2099.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 18th day of June, 2001.

laine 4. Marshall.
Secretary of State

Certification Number: 5605988-1 Page: 1 of 1 Ref. # 4622519
Verify this certificate online at www.secretary.state.nc.us/Verification.