CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301

Will Pick Up

Walk-In

417 E. Virginia Street, Suite 1 • Talianassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| un Coast Gateway Mobile Home | |
|---------------------------------------------------------|-------------------------------------------------------|
| k UC | |
| | 6000045018763 -07/27/0101037010 |
| | Art of Inc. File |
| | LTD Partnership File Foreign-Corp. File |
| | L.C. File Fictitious Name File |
| | Trade/Service Mark |
| - 1 10 N | Merger File Art. of Amend. File Art. of Amend. File |
| RECENTELS 01 JUL 27 AN IO: 41' DIVISION OF CORPGRATION | RA Resignation |
| RECENTEL 1 JUL 27 AM II SION OF CORPGI | Annual Report / Reinstatement 2 |
| REC 01 JUL VISION 0 | Cert. Copy Photo Copy |
|) No. | Certificate of Good Standing |
| | Certificate of Status Certificate of Fictitious Name |
| | Corp Record Search |
| | Officer Search |
| | Fictitious Search Fictitious Owner Search |
| Signature | Vehicle Search |
| | Driving Record |
| Requested by: | UCC 1 or 3 File |
| Name Date Time | UCC 11 Search |
| | UCC 11 Retrieval |

Courier_

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:

| Sun Coast Gateway Mobile Home Park, LLC | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| (Name of foreign limi | ited liability company) |
| Ohio 3. | 311188934 |
| Jurisdiction under the law of which foreign limited liability company is organized) | (FEI number, if applicable) |
| February 16, 1999 5. | perpetual |
| (Date of Organization) | (Duration: Year limited liability company will cease to exist or "perpetual") |
| upon qualification | · - |
| (Date first transacted business in Florida. (See sec | ctions 608.501, 608.502, and 817.155, F.S.) |
| 6010 Ridge Rd. | |
| New Port Richey, FL 34668 | |
| (Street address of | principal office) |
| Y61' '- 11' 1 '' | _ |
| If limited liability company is a manager-managed co | mpany, check here |
| | ASE O |
| The name and usual business addresses of the managi | ing members or managers are as follows: |
| Hugh Reid, 60 N. St. Rt. 101, Tiffin, OH | 44883 HASS |
| Margaret Reid, 60 N. St. Rt. 101, Tiffin, | , OH 44883 |
| Isaac Reid, 60 N. St. Rt. 101, Tiffin, OH | |
| Elizabeth Reid, 60 N. St. Rt. 101, Tiffin | э, ОН 44883 |
| Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under oath of the translator must be sub- | ys old, duly authenticated by the official having custody of records in upy is not acceptable. If the certificate is in a foreign language, a brmitted.) |
| Nature of business or purposes to be conducted or pr | romoted in Florida: all lawful business |
| permitted to be conducted under the laws | of the State of Florida and the United |
| States of America. Signature of a member or an autho (In accordance with section 608.408(3), F.S., an affirmation under the penalties of perjury to | orized representative of a member. the execution of this document constitutes |
| Jonathan James Damonte, | |
| Typed or printed na | |

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 o | f the Limited Liabi | lity Company is: | | | | |
|--------------------------------------------------|----------------------|-----------------------|---------------------------|------------------|-------|-----------------|
| Sun Coast | Gateway Mobile | Home Park, LLC | | <u></u> | _ | 4.5 |
| 2. The name as | nd the Florida stree | t address of the regi | stered agent and office a | are: | | |
| | Jonathan Jam | | | SECR | C 10 | |
| | | (Name) | | \$ <u></u> | Ħ | 2 |
| | 12110 Semino | le Blvd. | | TARY O ASSEE, | 27 A | |
| Florida street address (P.O. Box NOT ACCEPTABLE) | | | | | | |
| | Largo | FL. | 33778 | ORIDA | l: 28 | ₹ ^{~~} |
| | | (City/State/Zij | p) | | | |

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.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show SUN COAST GATEWAY MOBILE HOME PARK, LLC, an Ohio Limited Liability Company, Registration No. 1076736, was organized on February 16, 1999 and is currently in FULL FORCE AND EFFECT upon the records of this office.

GERETARIO DE LA CONTROL DE LA

WITNESS my hand and official seal at

Columbus, Ohio on

July 25, 2001

J. Kenneth Blackwell
Secretary of State