

010000 D2156

ACCOUNT NO.

072100000032

REFERENCE

541881

4726940

AUTHORIZATION

COST LIMIT

ORDER DATE: September 20, 2001

ORDER TIME: 11:04 AM

ORDER NO. : 541881-005

200004604403--5

CUSTOMER NO: 4726940

CUSTOMER: Ms. Michelle Hubbard Sommer & Barnard

4000 Bank One Tower 111 Monument Circle Indianapolis, IN 46204

FOREIGN FILINGS

NAME:

GATEWAY SHOPPES ASSOCIATES,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

CONTACT PERSON:

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

Deborah Schroder -- EXT# 1118

EXAMINER:

DIVISION OF CORPORATION

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:

(Name of foreig	n lin	iited liability company)
Indiana	3.	35-2139040
Jurisdiction under the law of which foreign limited liability company is organized)	,	(FEI number, if applicable)
March 30, 2001	5.	Perpetual
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
Upon qualification		
(Date first transacted business in Florida. (S	See si	ections 608.501, 608.502, and 817.155, F.S.)
One College Park, 8910 Purdue Road, Suite 3	50,	Indianapolis, IN 46268
(Street addre	ss of	principal office)
If limited liability company is a manager-manage	ed co	ompany, check here
The name and usual business addresses of the ma	anag	ging members or managers are as follows:
William L. Schrage, One College Park, 8910	Pur	due Road, Suite 350, Indianapolis, IN 46266
		شرق
		RA
		A
Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A pl translation of the certificate under eath of the translator must	otoc	opy is not acceptable. If the certificate is in a foreign language
		·
. Nature of business or purposes to be conducted	or p	promoted in Florida: Own and lease real
estate		
//////		_
Signature of a mambay or an	011+1-	orized representative of a member
_		orized representative of a member, the execution of this document constitutes
an affirmation under the penalties of p	erjur	y that the facts stated herein are true.)

William L. Schrage, Manager and Member

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.

1. The name of the Limited L	iability Comp	any is:			
Gateway Shoppes Associates	LLC				
2. The name and the Florida s	treet address	of the register	red agent and office are:		
	Corpora	tion Service	Company	As	
(Name)					
	7.	201 Hays Str	201	MSS	
Florida street address (P.O. Box NOT ACCEPTABLE)					
				STAT LOR	
Tall	ahassee (C	FL City/State/Zip)	32301	_ 호류	
Having been named as register liability company at the place of registered agent and agree to a statutes relating to the proper accept the obligations of my po	lesignated in t act in this cape and complete p sition as regis	this certificate acity. I furthe performance o	, I hereby accept the appoin r agree to comply with the p of my duties, and I am famili	ntment as provisions of all iar with and	
Wellorah 10 Sk (Signature	<u>ppen</u>		D. Skipper secretary		
	\$ 100.00	Filing Fee	for Application		
	\$ 25.00	_	n of Registered Agent		
	\$ 30.00 \$ 5.00		Copy (optional) of Status (optional)		

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

To Whom These Presents Come, Greeting:

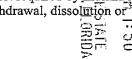
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper office to execute this certificate.

I further certify that records of this office disclose that

GATEWAY SHOPPES ASSOCIATES, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on: March 30, 2001, and was in existence or authorized to transact business in the State of Indiana on September 20, 2001

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 Twentieth day of September, 2001.

SUE ANNE GILROY, Secretary of State

- Sue anne Litry

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