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

CORPORATION(S) NAME

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. 36 Northeast 2md Consulting, LLC. (Name of foreign limited liability company) De laware
 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Perpetual 4. <u>January</u> 8, 2002 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") January 10, 2002 (Date first transacted business in Florida. (Sec sections 608.501, 608.502, and 817.155, F.S.) 7. c/o Jeffrey W. Krol Associates, 8700 West Bryn Mawr-Suite Eli Stearns Attn: 60631 810 North, Chicago, IL (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 9. The usual business addresses of the managing members or managers are as follows: c/o Jeffrey W. Krol Associates, 8700 West Bryn Mawr-Suite Eli Stearns Attn: 810 North, Chicago, IL 60631 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: The management of real property situated in the State of Florida and all such related activities as may be necessary or advisable in connection therewith and not otherwise prohibited.

Signature of a member or an authorized representative of a member. (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.)

Typed or printed name of signee

Steams, Manager of 36 Northeast 2nd Consulting, LLC

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 C	Company is:	•
36 Northeast 2nd Consulting	t, LLC	
2. The name and the Florida street add	lress of the registered agent and office are:	
C T Corporation System		
(Name)		
c/o C T Corporation System, 1200 South Pine Island Road		SECRE ISION
Florida street address (P.O. Box NOT ACCEPTABLE)		- 93- - 93-
Plantation	FL 33324	PH -
	City/State/Zip	ATTOMS : 06

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..

C T Corporation Syst	em en
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\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "36 NORTHEAST 2ND CONSULTING, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF JANUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1546133

DATE: 01-08-02

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