

m020000000934



FILED
02 APR 11 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032
REFERENCE : 518696 7157239
AUTHORIZATION : *Patricia Pigato*
COST LIMIT : \$ 125.00

ORDER DATE : April 9, 2002

ORDER TIME : 2:29 PM

ORDER NO. : 518696-005

CUSTOMER NO: 7157239

500005255535--1

CUSTOMER: Ms. Susan Tiller
Wood Partners Llc
Suite 150
1110 Northchase Pkwy
Marietta, GA 30067

FOREIGN FILINGS

NAME: ALTA CROSSINGS, L.L.C.

RECEIVED
02 APR 11 PM 3:15
DIVISION OF CONSTITUTION

Name	XXXX	QUALIFICATION	(TYPE: LL)
Availability			
Document Examiner		PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
	DCC	CERTIFIED COPY	
Updater	XX	PLAIN STAMPED COPY	
		CERTIFICATE OF GOOD STANDING	
Updater			
Verifier		DCC	
Acknowledged		CONTACT PERSON: Sara Lea -- EXT# 1114	
P. Verifier		DCC	

EXAMINER: _____

m020000000934

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

02 APR 11 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

1. Alta Crossings, L.L.C.
(Name of foreign limited liability company)
2. Georgia
(Jurisdiction under the law of which foreign limited liability company is organized)
3. Applied for
(FEI number, if applicable)
4. April 8, 2002
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 1110 Northchase Parkway, Suite 150
Marietta, GA 30067
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

Wood Alta Crossings, L.L.C.

1110 Northchase Parkway, Suite 150

Marietta, GA 30067

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: Any and all business not
specifically prohibited to LLC's including, but not limited to, real estate development.

Susan Hall Tiller

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.)

Susan Hall Tiller

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 Liability Company is:

Alta Crossings, L.L.C.

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. Pres.

(Signature)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 021010425
CONTROL NUMBER : 0218010
DATE INC/AUTH/FILED: 04/09/2002
JURISDICTION : GEORGIA
PRINT DATE : 04/11/2002
FORM NUMBER : 211

WOOD PARTNERS
SUSAN HALL TILLER
1110 NORTHCHASE PARKWAY, SUITE 150
MARIETTA, GA 30067

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

ALTA CROSSINGS, L.L.C.
A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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.



Cathy Cox

Cathy Cox
Secretary of State

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Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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Alta Crossings, L.L.C.

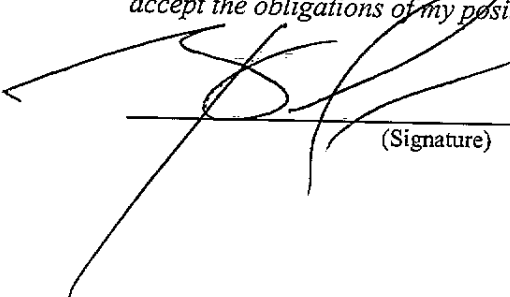
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