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() Limited Partnership	() Annual Report	() Other	
(X) LLC	() Name Registration	() Other () Change of RA () UCC	-
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Name	7/2/02	Order#: 5440852	
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Updater			
Verifier			
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 70006157277--5 -07/02/02--01049--008 \*\*\*3280.00 \*\*\*3280.00

IN CC LIMIT	OMPLIANCE WITH SECTION 608503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FORM EDILIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	710,
1. <u>B</u> a	ytree Island, L.L.C. (Name of foreign limited liability company)	7
. ~		
(Ju	laware  3. 52-2159791  risdiction under the law of which foreign limited liability  apany is organized)  (FEI number, if applicable)	,
4. <u>F</u>	(Date of Organization)  5 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	•
6. <u>F</u>	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	
7. <u>8</u> 8	Rivers Edge Road	
<u>N</u>	orth East, MD 21901 (Street address of principal office)	
8. If	limited liability company is a manager-managed company, check here	
9. T	ne usual business addresses of the managing members or managers are as follows:	,
8	8 Rivers Edge Road	٠. '
<u> </u>	forth East, MD 21901	٠.
-		
thejur	trached is an original cartificate of existence, no more than 90 days old, duly authenticated by the official having custody of rect isdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a tion of the certificate under eath of the translator must be submitted.)	nds i
ו וו	Nature of business or purposes to be conducted or promoted in Florida: Real Estate	
**1 -		

James M. Moran, Jr., Managing 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.

I. The name of the Limited Li	ability Company is:
Baytree Island, L.L.C.	
2. The name and the Florida st	treet address of the registered agent and office are:
C T Corporation S	System
	(Name)
c/o C T Corporation	on System, 1200 South Pine Island Road
Flo	orida street address (P.O. Box NOT ACCEPTABLE)
Plantation	FL 33324
<del></del>	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.

C T Corporation System

Jennifer A. Schwartz

Assistant Vice President

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## Delaware

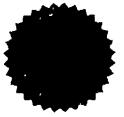
PAGE 1

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BAYTREE ISLAND, L.L.C." 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 FIRST DAY OF JULY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.





Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1863411

DATE: 07-01-02

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