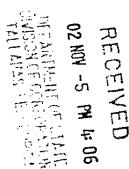
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(Requestor's Name)
(Address)
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MUZ OUUUU 2932
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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ACCOUNT NO. : 07210000032	
REFERENCE : 80840 7157239 300 8	
AUTHORIZATION: Potrice Printing 5	
COST LIMIT : \$ 130.00	1
ORDER DATE: November 5, 2002	-
ORDER TIME: 2:49 PM	
ORDER NO. : 808407-005	
CUSTOMER NO: 7157239	
CUSTOMER: Ms. Susan Tiller Wood Partners L1c Suite 150 1110 Northchase Pkwy Marietta, GA 30067	. *
FOREIGN FILINGS	
NAME: WOOD ALTA TERRACE, L.L.T.	
XXXX QUALIFICATION (TYPE: LL)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
XX PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Ginger Simmons EXT# 1139	
EXAMINER:	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATU			REGI ST ER A FOREIGN		
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TO	HE STATE OF FLORIDA;	•	10000000000000000000000000000000000000		
I. Wood Alta Terrace, L.L.C.	limited liability compan	'A			
(Name of foreign	limited Hability compan	y)			
2. Georgia	3. Applied for		The state of the s		
Georgia (Jurisdiction under the law of which foreign limited liability company is organized)	(FEI	number, if applicable			
4. 10/30/02	5. Perpetual		The state of the s		
4. 10/30/02 (Date of Organization)	(Duration: Year linexis	mited liability compa- st or "perpetual")	ny will cease to		
6. Upon qualification	=				
(Date first transacted business in Florida. (Se	e sections 608.501, 608.	502, and 817,155, F.:	<u>S.)</u>		
	_				
7. 1110 Northchase Pkwy, Suite 150			<u></u>		
Marietta, GA 30067	s of principal office)	<u> </u>	·		
(Street address	s of principal office)	•			
8. If limited liability company is a manager-manage	d company, check he	re x			
9. The name and usual business addresses of the ma	nagina mambara ar r	managane ana ao fa	Horne		
7. The name and usual business addresses of the ma	naging memoers of t	managers are as ro	mows.		
WP South Development Company, L.L.C.					
1110 Northchase Pkwy, Suite 150	··· =				
1220 MOLEMORIAGE FICKY, State 150			<u>-</u>		
Marietta, GA 30067	=				
Marzocca, 011 30007					
			<u> </u>		
10. Attached is an original certificate of existence, no more than 9		•			
the jurisdiction under the law of which it is organized. (A pho-	• •	If the certificate is in a	a toreign language, a		
translation of the certificate under oath of the translator must be	be submitted.)				
11. Nature of business or purposes to be conducted of	or promoted in Florid	ia: Any and all	business not		
			=		
prohibited to LLCs including but not limited	to real estate.				
William 71 Le	Cho	•	• - ••		
Signature of a member or an a					
(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

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF S THE UNDERSIGNED LIMITED LIABILI STATEMENT TO DESIGNATE A REGIS	ITY COMPAN	IY SÜBMITS THE FOLLO	WING 2
STATE OF FLORIDA.			
1. The name of the Limited Liability Com	ipany is:	= .	
Wood Alta Terrace, L.L.C.	تفيدة نامطتم بالمسابق		<u> </u>
2. The name and the Florida street address	s of the registe	· ·	
	(Name)	e company	_
	1201 Hays Str ddress (P.O. Box)	NOT ACCEPTABLE)	<u> </u>
Tallahassee	FI	32301	
	(City/State/Zip)	<u> </u>	
Having been named as registered agent and liability company at the place designated in registered agent and agree to act in this cap statutes relating to the proper and complete accept the obligations of my position as reg	n this certificate pacity. I furthe e performance gistered agent o	e, I hereby accept the appoin er agree to comply with the p of my duties, and I am famili	tment as provisions of all iar with and

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

Certificate of Status (optional)

\$ 30.00

5.00

Secretary of State

_Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0254274
DATE INC/AUTH/FILED: 10/30/2002
JURISDICTION : GEORGIA
PRINT DATE : 11/01/2002

FORM NUMBER : 211

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

FILEU 1: 05

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 as of the above print date

WOOD ALTA TERRACE, L.L.C.
GEORGIA LIMITED LIABILITY COMPANY

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Settetary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. 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 information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and 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.

20021101174004958



Cathy Cox
Secretary of State