

Division of Corporations

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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATION

BYK

FOREIGN LIMITED LIABILITY COMPANY

AMB CODINA BEACON LAKES, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

FILED
02 NOV 21 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1509055-0012
ATTN: m WAGNER

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:

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NOV 21 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. AMB CODINA BEACON LAKES, LLC
(Name of foreign limited liability company)

2. DELAWARE 3. applied for
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. November 15, 2002 5. December 31, 2050
(Date of Organization) (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. 355 Alhambra Circle, Suite 900
Coral Gables, Florida 33134
(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:

C/WDL, Ltd. (Administrative Member)
c/o 355 Alhambra Circle, Suite 900
Coral Gables, Florida 33134

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: _____

real-estate development and operations

Kolleen O.P. Cobb

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.)

Kolleen O.P. Cobb, VP of C/WDL, Inc. GP of C/WDL, Ltd.

Typed or printed name of signee

Fax Audit No. H02000229062

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.

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

1. The name of the Limited Liability Company is:

AMB CODINA BEACON LAKES, LLC

2. The name and the Florida street address of the registered agent and office are:

Kolleen O.P. Cobb, Esq.

(Name)

355 Alhambra Circle, Suite 900

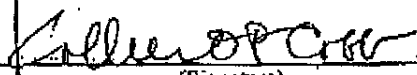
Florida street address (P.O. Box NOT ACCEPTABLE)

Coral Gables,

FL 33134

(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.



(Signature)

- \$ 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

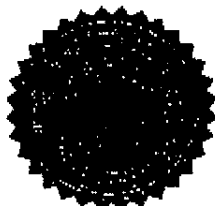
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TALLAHASSEE
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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMB CODINA BEACON LAKES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF NOVEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMB CODINA BEACON LAKES, LLC" WAS FORMED ON THE FIFTEENTH DAY OF NOVEMBER, A.D. 2002.

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



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3591338 8300

AUTHENTICATION: 2100488

020714810

DATE: 11-20-02