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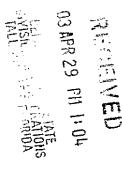
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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#### **CT** CORPORATION

April 29, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5837559 SO

Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Rainbow Stratford, LLC (DE)

Registration

Florida

Rainbow Stratford, LLC (DE)

Certificate of Status-Foreign

Florida

Rainbow Stratford, LLC (DE)

Cert Copy of Application for Authority-Foreign

Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

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

#### **CT** CORPORATION

Sincerely,

Ashley A Mitchell Fulfillment Specialist Ashley\_Mitchell@cch-lis.com

IALLAHARGEE - JAIC

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

Fax 850 222 7615

### 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:

Rainbow Stratford, LLC	
(Name of foreign limited liability company)	
Delaware 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)	
April <b>33</b> , 2003 5 perpetual	e e e e e e e e e e e e e e e e e e e
(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	cease to
(upon filing qualification)	
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	
556 Commercial Street, Suite 300, San Francisco, California 94111	
(Street address of principal office)	
. If limited liability company is a manager-managed company, check here	21 0 0
. The name and usual business addresses of the managing members or managers are as follows:	:
Rainbow Housing Assistance Corporation - MGRM	
556 Commercial Street, Suite 300	<u> </u>
San Francisco, California 94111	<u> </u>
	J3 A
	APR
<ol> <li>Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having out the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign translation of the certificate under oath of the translator must be submitted.)</li> </ol>	stody ôf records in n larighage, a
1. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Investment	SOFT O
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.)	
Deborah A. Moore, Authorized Representative	
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.

Rainbow Stratfor	rd, LLC		·	<u> </u>	
2. The name	and the Florida street ac	ldress of the regist	ered agent and office are	<b>:</b> :	
		C T Corporation Sy	ystem		
		(Name)		<u></u>	
		ration System, 1200 S reet address (P.O. Box	outh Pine Island Road  NOT ACCEPTABLE)	<u></u>	
	Plantation,	FL (City/State/Zip)	33324	<del></del> -	, . t
liability comp registered age statutes relati	named as registered age any at the place designa ent and agree to act in th ng to the proper and con ligations of my position o	ted in this certifica his capacity. I furth nplete performance	te, I hereby accept the ap her agree to comply with e of my duties, and I am j	ppointment as है the provisions of all familiar with and	
	ration System  Nana (USUS)  (Signature) A. BURI	KE CRETARY	,	ATE DRIDA	2: 00

\$ 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 "RAINBOW STRATFORD, 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 TWENTY-FOURTH DAY OF APRIL, A.D. 2003.



Varriet Smith Hindson Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2380727

DATE: 04-24-03

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