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DIVISION OF CLICATION



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CT CORPORATION

May 21, 2003

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



Re: Order #: 5849898 SO

Customer Reference 1: Naples Hawaii

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Naples Hawaii, LLC (WA) Registration 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.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff_Netherton@cch-lis.com

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

IKANSACI	DUSINESS IN FLORIDA	, , O3
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STA LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS I		
1. NAPLES HAWAII, LLC		W = 1.2
	reign limited liability company)	
2. WASHINGTON	3. 56-2352097	729 79
(Jurisdiction under the law of which foreign limited liabi company is organized)	ility (FEI number, if applicab	自
4. MAY 7, 2003 (Date of Organization)	5. PERPETUAL (Duration: Year limited liability comp.	any will cease to
6. Upan Qual (Date first transacted business in Florida 7. 820 "A" STREET, SUITE 600, PO BOX 1533	exist or "perpetual") 1. (See sections 608.501, 608.502, and 817.155, F	(.s.)
TACOMA, WA 98401		
(Street ad	ldress of principal office)	
8. If limited liability company is a manager-mana9. The usual business addresses of the managing ROBERT E. CHAPMAN		
AMFAC TOWER, SUITE 2100		
700 BISHOP STREET	,	
HONOLULU, HAWAII 96813		
10. Attached is an original certificate of existence, no more the jurisdiction under the law of which it is organized. (A plactranslation of the certificate under eath of the translator must be a supplied to the certificate.)	otocopy is not acceptable. If the certificate is in a for	
11. Nature of business or purposes to be conduct	ted or promoted in Florida: Real property r	nanagement
Signature of a member or a	an authorized representative of a member 8(3), F.6, the execution of this document constitutes of perjury that the facts stated herein are true.)	
ROBERT E. CHAPMAN, MAI	NAGER	

Typed or printed name of signee

FLOST - 11/1/99 CT System Online

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	v is:
------	-----	------	--------	---------	-----------	---------	-------

NAPLES HAWAII LLC								
	NI A	DT	EC	LI A	337	A TT	TT	^

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

	(Name)
c/o C T Corporation	System, 1200 South Pine Island Road
Florid	la street address (P.O. Box NOT ACCEPTABLE)
Plantation	FI. 33324

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.

CT Corporation System

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\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

The State of Washington

Secretary of State

I, Sam Reed, Secretary of State of the State of Washington and custodian of its hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

NAPLES HAWAII, LLC

I FURTHER CERTIFY that the records on file in this office show that the above named limited liability company was formed under the laws of the State of Washington and was issued a Certificate of Formation in Washington on May 7, 2003.

I FURTHER CERTIFY that as of the date of this certificate, no cancellation has been filed, and that the limited liability company is duly authorized to transact business in the limited liability company form in the State of Washington.

Date: May 7, 2003

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital.

Sam Reed, Secretary of State

