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DEPARTMENT OF STATE
NVISION OF CERPORATION
TALL AHASSEE, FLORIDA





ACCOUNT NO. : 072100000032

REFERENCE : 178014

78014 \_ 8314

AUTHORIZATION

COST LIMIT : \$ 130.00

ORDER DATE: July 22, 2003

ORDER TIME : 9:57 AM

ORDER NO. : 178014-045

CUSTOMER NO: 83140A

CUSTOMER: Linda M. Bierl, Legal Asst

Timmis & Inman 300 Talon Centre

Detroit, MI 48207

#### FOREIGN FILINGS

NAME: SHADY LANE SPE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull -- EXT# 1115

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA S.			REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS	INTHE STATE OF FLORIDA:	' ; <u>-</u>	رين کي ا
l Shady Lane SPE LLC		T.	2 6 7
(Nume of fo	oreign limited liability compan	y) :	72 1
•	- 1	:	\$ 10 Kg
<ol><li>Delaware (Jurisdiction under the law of which foreign limited liab</li></ol>	3 II/a	i number, if applicable	
company is organized)	Omis (111111	initionik it appreciose	ED P. 10
4 7/37/63	5. Perpetual	ļ	8 5 E
4. 7/22/03 (Date of Organization)	(Duration: Year lin	mited liability compar	y will cease to
· · · · · · · · · · · · · · · · · · ·	cxis	st or "perpetnal")	•
6. As soon as qualified	-	; ;	
(Date first transacted business in Florid	la. (See sections 608,501, 608.	502, and 817.155, F.S	5.)
7. 6160 S. Syracuse Way, Greenwood	Village, CO 80111		
7. 1000 01 01211100 11017	· III. ( G ) C C C C C C C C C C C C C C C C C C	:	
		<b>.</b> ;	
(Street a	iddress of principal office)		
8. If limited liability company is a manager-man	naaad aammans, ahaal ka	·~ [	
o, it initied tracinty company is a manager-mai	naged company, check he		
9. The name and usual business addresses of the	e managing members or r	nanagers are as fo	llows:
		:	
CP Limited Partnership, sole Mem	ber		
CLEO EL Companyo Mary Companyo d	77,111 00 00111	:	
6160 S. Syracuse Way, Greenwood	VIIIage, CO 80111		
		:	
		<u> </u>	<del></del>
			s
		1	
10. Attached is an original certificate of existence, no more			
the jurisdiction under the law of which it is organized. (		If the certificate is in a	foreign language, a
translation of the certificate under oath of the translator t	must be submitted)	:	
11. Nature of business or purposes to be conduc	ted or promoted in Floria	j Jar	
11. Training of purposes to be confident	ried of brotholed in Front		
Own and operate manufactured hous	ing community	<u>:</u>	
- 10	1////		
Jun for	Med L	<u> </u>	<del></del>
Signature of a member et			
(In accordance with section 608.4) an affirmation under the penalties			
	•	•	
CP Limited Partner	BuidRA: BradieA J.Ki	ilckerdocker	•_

Typed or printed name of signee

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

IOGICALIZED AGEATIAGOGI MINID OFFICE
PURSUANT TO THE PROVISIONS OF SECTION 608,415 of 608,507, FILORIDA 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 is:
Shady Lane SPE LLC
2. The name and the Florida street address of the registered agent and office are:
Corporation Service Company
(Name)
1201 Hays Street Florida street address (P.O. Box NOT ACCEPTABLE)
Tallahassee FT 32301
(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.  Brian Courtney Asst. V. Pres.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

(Signature)

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHADY LANE SPE 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-SECOND DAY OF JULY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SHADY LANE SPE LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF JULY, A.D. 2003.

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

23 PM 2: 40

Warriet Smith Windson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2542074

DATE: 07-22-03

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