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CT CORPORATION

July 25, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399 STATED 2:09
FILED PR 2:09

Re: Order #: 5900141 SO

Customer Reference 1: 4137-4

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Kissimmee Partners, LLC (IL) 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

	KIS	SIMMEE PARTNER	RS, LLC	
	(Nai	me of foreign limited li	ability company)	1976
	ILLINOIS n under the law of which foreign lim	3.	20-0105797	7
irisdictio	n under the law of which foreign lim company is organized)	ited liability	(FEI number, if a	pplicable)
	July 22, 2003	5.	Perpetual	I
	July 22, 2003 (Date of Organization)	(Du	ration: Year limited liabilit exist or "perpet	y company will cease to ual")
	(Date first transacted business in	July 22, 200	3	-
	(Date first transacted business in	n Florida. (See sections	608.501, 608.502, and 81	7.155, F.S.)
	308 W. Randolph Street, Chica	ago. IL 60606		
				· · · · · · · · · · · · · · · · · · ·
		(Street address of princ		
	((Street address of princ	ipar office)	
f limite	d liability company is a manag	er-managed compa	nv. check here	
If limite	d liability company is a manag	er-managed compa	ny, check here 🔀	
	d liability company is a manag ne and usual business addresse:			are as follows:
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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 AGENTS THE STATE OF FLORIDA.

STATE OF TEORIDA.	是是五
1. The name of the Limited Liability Company is:	S II
KISSIMMEE PARTNERS, LLC	至
2. The name and the Florida street address of the registered agent and office are:	CALLY 109
CT Corporation System (Name)	 .
1200 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE)	
Plantation FL 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.

Christine M. Eastwine
(Signature)

Christine M. Eastwine
Assistant Secretary

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

File Number-

0096578-2



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do

hereby certify that

KISSIMMEE PARTNERS, LLC,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JULY 22, 200
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMIT
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILIN OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 2003 day of

A.D.