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Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)222-9428 FOREIGN LIMITED LIABILITY COMPANY Emerald Lake SPE LLC

Emerald Lake SPE LLC

Certificate of Status	1
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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:

	(Name of foreign limited	liability company)
Delegan	3, N/s	
Delaware (Jurisdiction under the law o	f which foreign limited liability	(FEI number, if applicable)
September 22, 2	a organized)	•
(Date of Orga		rpetual Duration: Year limited liability company will cease to
(Date of Oth	tinssucti) /2	exist or "perpetual")
Upon admission		
(Date first to	ansacted business in Florida. (See section	ons 608,501, 608,502, and 817,155, F.S.)
150 N. Wacker Drive, Suit	e 900, Chicago, Illinois 60606	
	(Street address of pri	ncipal office)
TS limited Haliley		course of made from [V]
II muren hadinia com	pany is a manager-managed comp	pany, eneck here [e]
The name and usual by	siness addresses of the managing	g members or managers are as follows:
Mamataum Dacidential M	anager, L.L.C., a Delaware limited liabi	Tibu orange
. Homewall resided. At 14	mager, E. D.C., a Delaware immediate	HIJ BOMINOMY
150 N. Wacker Drive, Sui	te 900, Chicago, Illinois 60606	
. Attached is an original cert	ficate of existence, no more than 90 days	old, duly authenticated by the official having custody o
the jurisdiction under the l	aw of which it is organized. (A photoco	s old, duly authenticated by the official having custody of opy is not acceptable. If the certificate is in a foreign l
the jurisdiction under the l	ificate of existence, no more than 90 days aw of which it is organized. (A photoco icate under oath of the translator n	upy is not acceptable. If the certificate is in a foreign l
the jurisdiction under the l translation of the certif	aw of which it is organized. (A photoco icate under oath of the translator n	opy is not acceptable. If the certificate is in a foreign limust be submitted.)
the jurisdiction under the l translation of the certif	aw of which it is organized. (A photoco	opy is not acceptable. If the certificate is in a foreign limust be submitted.)
the jurisdiction under the l translation of the certif	aw of which it is organized. (A photoco icate under oath of the translator n	opy is not acceptable. If the certificate is in a foreign limust be submitted.)
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the jurisdiction under the l translation of the certif	aw of which it is organized. (A photocolicate under oath of the translator number of the translator number of the conducted or pronumber of the conducted or	opy is not acceptable. If the certificate is in a foreign I must be submitted.) moted in Florida: Real estate
the jurisdiction under the l translation of the certif	aw of which it is organized. (A photocolicate under oath of the translator number of the translator number of an authorize or an authorize organized with section 608.408(3), F.S., the	opy is not acceptable. If the certificate is in a foreign I must be submitted.) moted in Florida: Real estate zed representative of a member.
the jurisdiction under the l translation of the certif I. Nature of business or Sig (h) a	aw of which it is organized. (A photocolicate under oath of the translator numbers to be conducted or producted or product	opy is not acceptable. If the certificate is in a foreign I must be submitted.) moted in Florida: Real estate zed representative of a member. a execution of this document constitutes at the facts stated becein are true.)

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 is:

Emerald Lake SPE LLC

	~	red agent and office are:
	C T Corporation Syst	em
	(Name)	
c/o C T Corpor	ation System, 1200 So	th Pine Island Road
Florida st	reet address (P.O. Box)	NOT ACCEPTABLE)
Florida str Plantation,	reet address (P.O. Box)	NOT ACCEPTABLE) 33324

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.

Michael J. Smith Assistant Secretary

Corporation_System

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

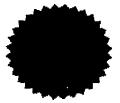
\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EMERALD LAKE 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-FOURTH DAY OF SEPTEMBER, A.D. 2003.

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



Warriet Smith Hindso Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2649389

DATE: 09-24-03