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CUSTOMER:	Mr. Chris A. Price Cbl & Associates Prop Suite 500 2030 Hamilton Place E Chatanooga, TN 37421	Blvd.	
CUSTOMER N	7376054		
ORDER NO.	: 288205-050		-
ORDER TIME	: 10:20 AM		
ORDER DATE	: October 21, 2003		18
	COST LIMIT :	: \$ 160.00	
	AUTHORIZATION :	tatricia typuta	- 13 17
	REFERENCE :	2883 05 73 7609	54
	ACCOUNT NO. :	072100000032	4.03

COBBLESTONE VILLAGE AT ST.

AUGUSTINE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

NAME:

PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 1140

EXAMINER:

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

	COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
الك	
1.	Cobblestone Village at St. Augustine, LLC (Name of foreign limited liability company)
2.	Delaware Jurisdiction under the law of which foreign limited liability 3. 62–1838955 (FEI number, if applicable)
(Je Laware 3. 62-1838955 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4.	October 21, 2003 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	Upon filing of Application for Authorization
-	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7.	CBL Center, Suite 500, 2030 Hamilton Place Boulevard
	Chattanooga, TN 37421
	(Street address of principal office)
	· · · · · · · · · · · · · · · · · · ·
8.	If limited liability company is a manager-managed company, check here X
9.	The name and usual business addresses of the managing members or managers are as follows:
	CBL & Associates Limited Partnership
	CBL Center, Suite 500, 2030 Hamilton Place Boulevard
	Chattanooga, TN 37421
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida:Commercial real
	estate acquisition, investment, ownership and operation
	James 12. Heduson
	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.)
	By: James D. Henderson, Assistant Secretary
	Typed or printed name of signee

By: CBL & Associates Limited Partnership

its chief manager

By:

CBL Höldings I, Inc., its sole general partner

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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.

STATE OF PEORIDA.		
1. The name of the Limited Liability Company is:		
Cobblestone Village at St. Augustine, 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)		Tree .

Tallahassee FL 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.

Jeanine Reynolds
as its agent

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

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Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COBBLESTONE VILLIAGE AT ST.

AUGUSTINE, 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-FIRST DAY OF OCTOBER, A.D. 2003.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COBBLESTONE VILLIAGE AT ST. AUGUSTINE, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF OCTOBER, A.D. 2003.



Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 2702636

DATE: 10-21-03

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