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BOONE, BOON ´` , VË	LAW OFFICE E, BOONE, I RO. BOX 15: NICE, FLORID	KODA & FRO	OK, F	?A.
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10/22/03--01065--010 **125.00

MB-3597

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBM LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	TITED TO	REGISTER	A FOR	REIGN
1. Fourth Quarter Properties XLIX, LLC (Name of foreign limited liability company)				
-	7 9 1			
2. Georgia 3 14-1873792 (Jurisdiction underline law of which foreign limited liability company is organized) (FEI number, if approximately company is organized)	plicable)		 -	
4. (Date of Organization) 5. Respectus (Duration: Year limited liability exist or "perpet	company v	vill cease to		
6. 10 25 03 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 81	7.155, F.S.)			
7. 300 Village Green Circle Suite 200	<u> </u> =			-
Smyrna, GA 30080 (Street address of principal office)) e			
8. If limited liability company is a manager-managed company, check here	•			
9. The name and usual business addresses of the managing members or managers		lows:		
Stanley E. Thomas 300 Village Green Circle St Smyrna, GA 30080	200	7		
Smyrna, GA 30080	<u></u>	<u> </u>		
	1	<u> </u>	22	
<u>*</u>		142		<u> </u>
	2 7.			
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate under oath of the translator must be submitted.)	official hav		of recon	
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificant translation of the certificate under oath of the translator must be submitted.)	official hav		of recon	
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida:	official hav		of recon	
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the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate under cath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Acquisition Signature of a member or an authorized representative of a refunction of the certificate under cath of the translator must be submitted.)	official havicate is in a		of recon	

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:	:
Fourth Quarter Proporties XLIX, LLC	
2. The name and the Florida street address of the registered agent and off	ice are:
Margaret S. Frook Boone, Boone, Boone, Boo	me, Koda F Frook, P.A.
tool Avenido del Circo	
Florida street address (P.O. Box NOT ACCEPTABLE)	
Venice FL 34285 (City/State/Zip)	70000000000000000000000000000000000000
(City/State/Zip)	SE SE
Having been named as registered agent and to accept service of process for	
liability company at the place designated in this certificate, I hereby accept registered agent and agree to act in this capacity. I further agree to comply statutes relating to the proper and complete performance of my duties, and	the appointment as way with the provisions of all I am familiar with and
accept the obligations of my position as registered agent as provided for in	Chapter 608, F.S.
Margary & Stook	•
(Signature)	l in
\$ 100.00 Filing Fee for Application	·

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0202208
DATE INC/AUTH/FILED: 01/08/2002
JURISDICTION : GEORGIA
PRINT DATE : 09/18/2003

FORM NUMBER : 211

THOMAS ENTERPRISES, INC.
LAMAR MADDOX
300 VILLAGE GREEN CIRCLE, SUITE 200
SMYRNA, GA 30080

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

GEORGIA TIMILED CLYBITLITY COMPANY

is in compliance with the appricable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above asse and has not filed articles of dissolution, certificate of Cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legs existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronical Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Cathy Cox : Secretary of State