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(Requestor's Name) (Address) (Address)	700037028607		
(City/State/Zip/Phone #)	06/01/0401003002 **125.00		
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	04 IAY 28 DIVISION		
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- CORPORATION Systen As VAM.

May 28, 2004





Re: Order #: 6114183 SO Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

mial Square, LLC (GA)

Wimbledon Ridge, LLC (GA) 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,

Ashley A Mitchell Fulfillment Specialist Ashley_Mitchell@cch-lis.com



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

Wimbledon Ridge, LLC		
(Name of foreig	gn lin	uited liability company)
Georgia	3.	20 - 1/73663 n.s. (FEI number, if applicable)
Jurisdiction under the law of which foreign limited liabilit company is organized)	y	(FEI number, if applicable)
April 29, 2004	5.	
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
Upon Qualification		
(Date first transacted business in Florida. (See se	ections 608.501, 608.502, and 817.155, F.S.)
215 Celebration Place, Suite 200		
Celebration, FL 34747	_	
(Street addre	ess of	f principal office)
If limited liability company is a manager-manag	ed co	ompany, check here 🗹
The name and usual business addresses of the m	anag	ging members or managers are as follows:
Edward R. Ginn, III		
215 Celebration Place, Suite 200		
Celebration, FL 34747		

- 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: _any and all lawful

business not specifically prohibited to profit LLC's under the laws of the state of Florida

UZ Ň

Signature of a member or an anthonized 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.)

Penny J. Farr

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 AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Wimbledon Ridge, LLC

2. The name and the Florida street address of the registered agent and office are:

CT Corporation System (Name) 1200 South Pine Island Rd Florida street address (P.O. Box NOT ACCEPTABLE)

Plantation.

33324 FI

(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.

Connie Bryan (Signature) Carnie Bryan

\$ 100.00 Filing Fee for Application

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 **Certified Copy (optional)**

5.00 Certificate of Status (optional) S

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER :	0427741
DATE INC/AUTH/FILED:	04/29/2004
JURISDICTION :	GEORGIA
PRINT DATE :	05/27/2004
FORM NUMBER :	211

MORRIS, MANNING & MARTIN PENNY FARR 1600 ATLANTA FINANCIAL, 3343 PEACHTREE ROAD ATLANTA, GA 30326

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

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

Said entity was formed in the junigdiction flated above or was authorized to transact business in Georgra Son the above baby and has not filed articles of dissolution, centificate of cancellation or any other similar document with the Office of the Sepretary of state.

This certificate helate ce o£ the above-named entity to the 2ec whether or not a notice of a statement of commencement as of the print date above It does whithdrawal, intent to dissolve Man application Been filed or is pending with gther similar document has of winding up or an the Secretary of State C. ີ່ພວບວ່ວນີ້

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic 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.

20040527185314946



Cathy Cox Secretary of State