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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



ACCOUNT NO. : 072100000032 REFERENCE: 902670 COST LIMIT ORDER DATE: September 27, 2004 ORDER TIME : 9:10 AM ORDER NO. : 902670-005 CUSTOMER NO: 7373023 CUSTOMER: Ms. Katharine E. Seidelman Levenfeld Pearlstein Suite 300 211 Waukegan Road Northfield, IL 60093 FOREIGN FILINGS NAME: JDI BARRINGTON TERRACE, L.L.C. XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY ___ PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Troy Todd -- EXT# 2940

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 692503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGREER A FORE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of Foreign Limited Liability Company)
	• • • •
24	TILINOIS (FEI number, if applicable) company is organized)
Л	AUGUST 18, 2004 5. PERPETUAL
*F	(Date of Organizadon) (Duration) Year limited liability company will cease to exist or "perpetual")
6.	(Date first wansacted business in Florids, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)
7,	150 8. WACKER DRIVE, SUITE 2660, CHICAGO, ILLINOIS 60606
	(Sircet Address of Principal Office)
3.	If limited liability company is a manager-managed company, check here
9.	The name and usual business addresses of the managing members or managers are as follows:
	KEVIN CONNOR 150 S. WACKER DRIVE, SUITE 2660, CHICAGO, ILLINOIS 60606
	JEFFREY AEDER 150 S. WACKER DRIVE, SUITE 2660, CHICAGO, ILLINOIS 60606
th:	guisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
th:	
the	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fineign language, a ustation of the certificate under oath of the translator must be submitted.)
the Tal	purisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fixeign language, a relation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: The purpose of this company is to
the Tal II	njurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fireign language, a relation of the certificate under oath of the translation must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: The purpose of this company is to all lawful invasionants and undertake such other sectivities related or income.
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the Tal II	ndation of the conflicate under onth of the translator must be submitted) Nature of business or purposes to be conducted or promoted in Florida: The purpose of this company is to all levely businesses, make any and all levely invasionents and undertake such other serivities related or the Manager way decarmine has in the interacts of the company
the TH	purisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fixeign language, a relation of the certificate under each of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: The purpose of this company is to all lewful invasionents and undertake such other scrivicies related or in the manager may determine as in the interests of the company Signature of a member of an authorized representative of a member. (In accordance with rection 608.408(3), P.S., the execution of this document considutes

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, PLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT

TO DESIGNA FLORIDA	ATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE S	TATE OF
1. The name o	of the Limited Liability Company is:	
JDI BARRINGI	GTON TERRACE, L.L.C.	
2. The name a	and the Florida street address of the registered agent and office me:	
	Corporation Service Company	
	(Name)	-
	1201 Hays Street	
	Plorida Street Address (P.O. Box NOT ACCEPTABLE)	-
	Tallahassee FI 32301 City/State/Zip	-
liability comparagent and agree relating to the policy obligations of marches comparate in	named as registered agent and to accept service of process for the above stany at the place designated in this certificate, I hereby accept the appointmee to act in this capacity. I further agree to comply with the provisions of a proper and complete performance of my duties, and I am familiar with an my position as registered agent as provided for in Chapter 608, Florida Scion Service Company LLO (DO——— (Signature)	n ent as registered all statutes ad accept the

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



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

JDI BARRINGTON TERRACE, L.L.C.,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 18, 2004,
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING
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

day of

September

A.D

2004

Desse White

SECRETARY OF STATE