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ACCOUNT NO. : 072100000032

REFERENCE :

921748 81523A 字

AUTHORIZATION

\$ 155.00 COST LIMIT :

ORDER DATE: October 11, 2004

ORDER TIME : 10:19 AM

ORDER NO. : 921748-030

CUSTOMER NO: 81523A

CUSTOMER: Daniel L. Decubellis, Esq.

Decubellis, Meeks & Uncapher,

837 North Garland Avenue

Orlando, FL 32801

FOREIGN FILINGS

NAME:

RMP AT APOPKA MEDICAL

BUILDING, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY ____ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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: | | |
|---|--|--|--|
| 1 | 1 RMP AT APOPKA MEDICAL BUILDING, LLC | | |
| (Name of Foreign Limited Liability Company) | | | |
| | Delaware 3. 20-1839366 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) | | |
| 4. | October 12, 2004 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") | | |
| 6. | Upon Qualification | | |
| | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | | |
| 7. | 975 Johnson Ferry Road | | |
| | Atlanta, GA 30342 | | |
| | (Street Address of Principal Office) | | |
| 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 are as follows: | | |
| | Lea Richmond III, 975 Johnson Ferry Road, Atlanta GA 30342 | | |
| | L & S Capital Holdings, LLC, 975 Johnson Ferry Road, Atlanta, GA 30342 | | |
| | | | |
| tbe | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation 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 | | |
| | 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.) | | |

Typed or printed name of signee

Daniel L DeCubellis

1. The name of the Limited Liability Company is:

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.

| RMP AT APOPKA MEDICAL BUILDING, LLC | |
|---|--|
| 2. The name and the Florida street address of the registered agent and office are | e: |
| DeCubellis, Meeks & Uncapher, P.A. | |
| (Name) | |
| 837 North Garland Avenue | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| Orlando FL 32801 | |
| City/State/Zip | |
| Having been named as registered agent and to accept service of process for the all liability company at the place designated in this certificate, I hereby accept the appagent and agree to act in this capacity. I further agree to comply with the provision relating to the proper and complete performance of my duties, and I am familiar working obligations of my position as registered agent as provided for in Chapter 608, Flo | pointment as registere ons of all statutes with and 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)

Delaware

The First State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RMP AT APOPKA MEDICAL BUILDING, 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 TWELFTH DAY OF OCTOBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RMP AT APOPKA MEDICAL BUILDING, LLC" WAS FORMED ON THE TWELFTH DAY OF OCTOBER, A.D. 2004.

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



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3404985

DATE: 10-12-04