

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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FOREIGN LIMITED LIABILITY COMPAN

TAMPA TRI-COUNTY MANAGER, LLC

| Certificate of Status | 1 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$160.00 |

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Lydia Lott

IN COMPLIANCE WITH SECTION 608:503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

| (Name of Foreign Limited I | Liability Company) |
|--|---|
| Delaware (Jurisdiction under the law of which foreign limited liability company is organized) | 3. (FEI number, if applicable) |
| August 11, 2005 (Date of Organization) | 5 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") |
| Upon Filing (Date first transacted business in FI (See sections 608.501 & 608.502 F S | orids, if prior to registration.) to determine penalty liability) |
| 31700 Middlebelt Road, Suite 135, Farmington Hills, M | I 48334 |
| (Street Address | of Principal Office) |
| If limited liability company is a manager-managed | company, check here |
| The name and usual business addresses of the man | aging members or managers are as follows: |
| Adam M. Lutz | |
| 31700 Middlebelt Road, Sulte 135 | |
| Farmington Hills, MI 48334 | |
| O Attached is an original certificate of existence, no more than 90 or equivalent in the law of which it is organized. (A photocopy assistation of the certificate under each of the translator must be subm | y is not acceptable. If the certificate is in a foreign language, a |
| Nature of business or purposes to be conducted or | r promoted in Florida: Real Estate Investment |
| _ Sus_ R Mil | Austa- |
| | thorized representative of a member. S, the execution of this document constitutes my that the facts stated berein are tops.) |
| Susan R McMaster, Authorized R | · · |

Typed or printed name of signee

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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.

| The | name of the Limited Liability Company is: |
|------|---|
| ampa | Tri-County Manager LLC |
| The | name and the Florida street address of the registered agent and office are: |
| | NRAI Services, Inc. |
| | (Name) |
| | 2731 Executive Park Drive, Suite 4 |
| | Florida Street Address (P.O. Box NOT ACCEPTABLE) |
| | Weston F1_33331 |
| | Číty/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 finther 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, Florida Statutes NRAI Services, Inc.

Sue Johnson Secretury

\$ 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

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TAMPA TRI-COUNTY MANAGER 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 AUGUST, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TAMPA TRI-COUNTY MANAGER LAC" WAS FORMED ON THE ELEVENTH DAY OF AUGUST, A.D. 2005.

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

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Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4089178

PATE: 08-12-05