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(Requestor's Name)
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PICK-UP WAIT MAIL
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CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):
1. COUNTY Report (Corporation Name)	pserve Apartments,
2(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)  Walk in Pick up time  Mail out Will wait	(Document #)  Certified Copy 2C/C  Photocopy  Certificate of Status Need
NEW FILINGS	AMENDMENTS Q CUS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other
CR2E031(7/97)	Examiner's Initials

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

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:

1. Courtney Reserve Apartments, LLC	
(Name of Foreign Limited	Liability Company)
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)	3. 20-3446399 (FEI number, if applicable)
4. 10/04/2005 (Date of Organization)	1 Liability Company)  3. 20-3446399  (FEI number, if applicable)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6. 10/05/2005  (Date first transacted business in F (See sections 608.501 & 608.502 F.	Porida, if prior to registration.)
7. 100 Colonial Center Pkwy., Suite 470,	Lake Mary, FL 32746
(Street Addres	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
9. The name and usual business addresses of the ma	anaging members or managers are as follows:
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under each of the translator must be sufficient.)	
11. Nature of business or purposes to be conducted	or promoted in Florida: To engage in any lawful
activity for which limited liability compar	
John Aclif	ger
(In accordance with section 608.408(3), an affirmation under the penalties of pe	ruthorized representative of a member. F.S., the execution of this document constitutes being that the facts stated herein are true.)
John A. Schaffer, Vice F	resident

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	e of the Limited Liability Con	npany is:	
Courtne	y Reserve Apartmer	nts, LLC	
2. The name	e and the Florida street addres	s of the registered agent and office are:	
	Corporation Comp	any of Orlando (Name)	
300 South Orange Ave., Suite 1000 (DTO)  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 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, Florida Statutes. Corporation Company of Orkando

J. Gregory Humberies, Vice Pres.

\$ 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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## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COURTNEY RESERVE APARTMENTS, 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 FOURTH DAY OF OCTOBER, A.D. 2005.



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4202987

DATE: 10-04-05

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