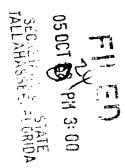
M0500005942

(Reque	stor's Name)
(Addres	s)
(Addres	s)
(City/Sta	ate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busine	ss Entity Name)
(Docum	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	g Officer:





300060656733



OS OCT 24 PM 3: 00 OS OC SECUMASSEE FLORIDADIVISION

JU 05 0CF 24 FH 12: 50



ACCOUNT NO. : 072100000032

REFERENCE : 666541

AUTHORIZATION : 1

COST LIMIT : \$ 155.00

ORDER DATE: October 21, 2005

ORDER TIME : 10:55 AM

ORDER NO. : 666541-005

CUSTOMER NO: 4804992

FOREIGN FILINGS

NAME: PAULDING EXCHANGE 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: Jeanine Reynolds -- EXT# 2933

EXAMINER:

,		
t *		. پانس
		and the same of th
		شدر . دومنسد 5
APPLICATION B	BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA	F 10 0
	SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORK PANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:	TON OS
L Paulding Exchan	nge, LLC	OF CO
	(Name of Foreign Limited Liability Company)	
2. Delaware	3. 59-3767544	
(Jurisdiction under the la company is organized)	law of which foreign limited liability (FEI number, if applicable)	
4 February 14, 2	2003 5 December 31, 2053	-1 <u>1</u>
	Organization) (Duration: Year limited liability company will cease to	3
	exist or "perpetual")	4-19
6	(Date first transacted business in Florida, if prior to registration.)	
((See sections 608.501 & 608.502 F.S. to determine penalty liability)	جر آ
7. 1000 Mansell E	Exchange West, Building 200, Suite 210	00
Alpharetta, Geor	Orgia 30022 (Street Address of Principal Office)	
	· · · · · · · · · · · · · · · · · · ·	
8. If limited liability co	company is a manager-managed company, check here	
9. The name and usual	al business addresses of the managing members or managers are as follows:	
Charles William	Kolbrener and James E. Bridges	
1000 Mansell E	Exchange West, Building 200, Suite 210	
Alpharetta, Ge	eorgia 30022	
the jurisdiction under the law	certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records w of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a under oath of the translator must be submitted.)	s in
11. Nature of business	s or purposes to be conducted or promoted in Florida: Own real estate	
	1	
Ş	Signature of a member of 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.) Robert F. Goodman, Jr., Authorized Representative	
	report i . Goodinan, on, nationized representative	

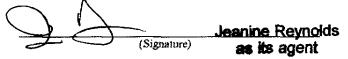
Typed or printed name of signee

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:		
Paulding Exchange, LLC		
The name and the Florida street address of the registered agent and office are:		
Corporation Service Company		
(Name)		
1201 Hays Street		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Tallahassee _{FL} 32301		
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.



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

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PAULDING EXCHANGE, 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 TWENTY-FOURTH DAY OF OCTOBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PAULDING EXCHANGE, LLC" WAS FORMED ON THE FOURTEENTH DAY OF FEBRUARY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Varriet Smeth Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4245015

DATE: 10-24-05

3626154 8300

050864115