# MU6000000159

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	» #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Fiting Officer:	K

Office Use Only



200062311512

2006 JAN 10 AM 10: 34 SECRETARY OF STATE TALLAHASSEE, FLORID

OB JAN -6 PH 15: 45

T. Hampton JAN 0 9 2006



ACCOUNT NO. : 072100000032

REFERENCE :

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE: January 5, 2006

ORDER TIME : 11:04 AM

ORDER NO. : 795824-005

CUSTOMER NO: 4323092

#### FOREIGN FILINGS

NAME: LAKE MANN ASSOCIATES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER: \_\_\_\_\_

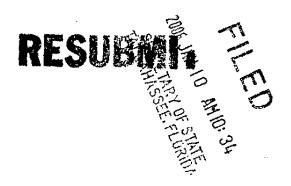


January 10, 2006

AMANDA HADDAN CSC TALLAHASSEE, FL

SUBJECT: LAKE MANN ASSOCIATES LLC

Ref. Number: W06000000999



We have received your document for LAKE MANN ASSOCIATES LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

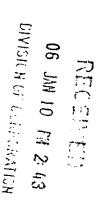
In Item 9, the address given for the entities is "Room 1301, Avenue of the Americas". Please list the street address number.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 106A00001683



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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATU LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TH	TES, THI E STATE	E FOLLOWA COFFLORIO	ING IS SUR DA:	MITTED TO	REGIST	ER A FO	REIGN
1 LAKE MANN ASSOCIATES LLC					2000 2000 2000	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	. Service
(Name of Foreign Limited	Liability	(Company)				3 3	
2. Delaware	,				Ž	050	
(Jurisdiction under the law of which foreign limited liability company is organized)	J	(1	FEI number,	if applicat	ole)	17.5x 20.0	T. O.
4. September 28, 2005	.J	petual				6,5	
(Date of Organization)	(D	uration: Yea ist or "perpe	ar limited lia stual")	bility comp	any will o	cease to	
6. Upon filing.							
(Date first transacted business in F (See sections 608.501 & 608.502 F.	lorida, it	prior to reg	istration.)				
7. 802 GATLIN AVENUE		oriente pont					
ORLANDO, FL 32806							
(Street Addres	s of Prin	cipal Office	)	<del></del>			
8. If limited liability company is a manager-manage 9. The name and usual business addresses of the ma	naging	members	or manage				
AEC Management LLC, c/o Affirmative Equities Compar	y, New	Avenue York, N	of the A	lmerica: 10013	s, Roo	m 1301	
AEC Lake Mann Management LLC, c/o Affirmative Eq	uities Co	16 mpany, Ne	l Avenue w York,	e of the New Yor	ck 100	13	Room 13
And Tubelt, c/o Affirmative Equities Company, New	Avenu	ie of th	e Ameria	as. Roc	om 130	1	
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 oath of the translator must be su	pyisnot	acceptable.	nticated by th If the certifica	eofficial ha ateisin a fo	rving custo reign lang	ody of reco guage, a	ords in
11. Nature of business or purposes to be conducted	or pron	noted in Fl	lorida:				
own: operate la	he	Mann Lh	Apastus -	ents -	Orla	nlo,	FL
Signature of a member or are (In accordance with section 608.408(3), an affirmation under the penalties of pe	F.S., the rjury that	execution of the facts state	this documented herein are	constitutes	- r.		
	_	<u>۵۰ ۲۱</u>			<del>-</del>		
Typed or printe	ed name	e of signee	3				

### 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.

	ne of the Limited Liability C	Company is:	
2. The nam	ne and the Florida street add	dress of the registered agent and office are:	
	Corporation Service Com	ipany	
		(Name)	
	1201 Hays Street		
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	
	Tailahassee	FL 32301	
		City/State/Zip	
liability con agent and a relating to t obligations	npany at the place designated gree to act in this capacity. he proper and complete perf	t and to accept service of process for the above stated lined in this certificate, I hereby accept the appointment as a I further agree to comply with the provisions of all status formance of my duties, and I am familiar with and accept agent as provided for in Chapter 608, Florida Statutes.  Cynthia L. Harris  as its agent	registered <sub>Ites</sub>

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

PAGE 1

# Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LAKE MANN ASSOCIATES 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 FIFTH DAY OF JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAKE MANN ASSOCIATES LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2005.

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



Harriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4426583

DATE: 01-05-06

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