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Florida Department of State

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Citall Development, LLC

Certificate of Status

Certified Copy

Page Count

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Help

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

| Citall Development, LLC | | | | |
|--|---|--|-----------------------------|--------------|
| (Name of For | eign Limited Lie | oility Company) | | |
| Delivare | 3. | | r, if applicable) | |
| Delaware Included to the law of which foreign lime company is organized) | nited habitity | (PEI numos | t' it abbroromi | |
| January 1 2006 | 5. | Perpetual | - N | |
| (Date of Organization) | | (Duration: Year limited li cost or "perpetual") | ability company will cease | se to |
| | | | | |
| (See sections 602.501 a | business in Florid 2 608.502 P.S. to | is, if prior to registration.) determine penalty liability | > | |
| 400 South Teyon St, Ste 1300 | | | | |
| Charlotte, NC 28201 | | | | |
| | treet Address of | Principal Office) | | |
| If limited lisbility company is a manag | er-managed co | mpany, check here 📝 | I | |
| The name and usual business addresses | s of the manag | ing members or manag | ers are as follows: | |
| Arthur W. Fields 400 South Tryon St. Ste | 1300, Charlotte, N | IC 28201 | | |
| James C. Smith 400 South Tryon St. Ste | 1300, Charlotte, Y | C 28201 | | · · · · · |
| R. Wayne McGee 400 South Tryon St, St | = 1300, Charlotte, | NC 28201 | | |
| Affacted is an original certificate of existence, no priscipation under the law of which it is organized sistion of the certificate under certific translate | i. (A photocopy is cromatibe submitt | notecoptable. If the certific cd) | gengus lagisudi a nisi ense | |
| Nature of business or purposes to be o | conducted or p | romoted in Florida: _T | o conduct any | <u> </u> |
| lawful business. | | | | 7- |
| 7 | airel | | | 572. 572. |
| Min man A = 22 or | 1 | rized representative of | P | المست |
| Signature of afficin | Det et in som | EIXOU LEDICESCUMFIAC D | r w memoer: | 1 |
| (In accordance with section | n 602.408(3), F.S., | the execution of this document that the facts attack herein spo | it constitutes | |

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.

| CT Corporation System (Name) 1200 South Pine Island Road Florida street address (P.O. Box NOT acceptable) Plentation FL 33324 (City/State/Zip) A Flaving 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 alstandes 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, F.S. Company Reader (Signature) Company Reader (Signature) | <u></u> | Citall | Development, | LLC | | , |
|--|--|---|---|--|---|----------------------|
| CI Corporation System (Name) 1200 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE) Plentation FL 33324 (City/State/Zip) 4 Raving been named as registered agent and to accept service of process for the above stated limited tability 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 tattless 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, F.S. Comic Base on (Signature) | , | | , P. | | | |
| IZOO South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE) Plentation FL 33324 (City/State/Zip) A 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 tatutes 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, F.S. Comic Basea. (Signature) | . The name at | nd the Florida | street address of the regis | stered agent and o | frice are: | |
| IZOO South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE) Plentation FL 33324 (City/State/Zip) A Graph of 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 tatutes 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, F.S. Comic Basea. (Signature) | | , | | • | | |
| Florida street address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324 (City/State/Zip) A Gaving been named as registered agent and to accept service of process for the above stated limited tability company at the place designated in this certificate, I hereby accept the appointment as egistered agent and agree to act in this capacity. I further agree to comply with the provisions of all tables 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, F.S. Comic Base Company (Signature) | | | CT Corporation Sys | stem | <u> </u> | |
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| Florida street address (P.O. Box NOT ACCEPTABLE) Plentation FL 33324 (City/State/Zip) A (City/State/Zip) A Inving 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 altatudes 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, F.S. Complete Base Complete Pagent as provided for the Chapter 608, F.S. | • | | • | • | | · |
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| (City/State/Zip) A A A A A A A A A A A A A | | | . ' | | | |
| (City/State/Zip) A A A A A A A A A A A A A | | | Plantation III | 33324 | | • |
| lability 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, F.S. Comic Base Company. | | <u> </u> | | | | , |
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| | iability compa registered ager tatates relatin | my at the place nt and agree t g to the prope | e designated in this certific o act in this capacity. I fur er and complete performan | cate, I hereby acce other agree to com- ace of my duties, ar | pt the appointment a ply with the provision of I am familiar with | s ns of al and |
| onnie Bryan, Special Asst. Secy. | | Comû B. | urd) | . | | |
| | conie Brya | n. Special | Asst. Secy. | | • | |
| S 100.00 Filing Fee for Application | | | | ation of Registers | | |

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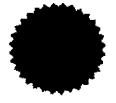
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P.06/06



I, HARRIST SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELANARE, DO HEREBY CERTIFY "CITALL DEVELOPMENT, LLC" IS DULY FORKED 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 TWELFTE DAY OF JANUARY, A.D. 2006.

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



4092566 8300

060033559

Farrier Smith Hindren Harrier Smith Windson, Secretary of State

AUTHENTICATION: 4444917

DATE: 01-12-06