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SECHETARY OF STATE

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April 17, 2006

Secretary of State Florida Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re:

WSNH2, LLC

Dear Clerk:

Enclosed for filing please find Application for Registration for the above-captioned entity. Also enclosed please find a check to cover the filing fee associated with this request Once filed, please return a file-stamped copy at your earliest opportunity.

Thank you for your attention to this request. Should you have any questions, pleasedo not hesitate to give me a call.

Sincerely,

Cammie Warburton
Account Representative

:cw

Enclosures

FILEU

PH 12: 25

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

IN COMPILANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. WSNH2, LLC | |
|--|--|
| (Name of Foreign | Limited Liability Company) |
| 2. Wyoming | 3 |
| (Jurisdiction under the law of which foreign limited company is organized) | Hiability (FEI number, if applicable) |
| 4. January 6, 2006 | 5 perpetual |
| (Date of Organization) | (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6 <u></u> | |
| (Date first transacted busi (See sections 608.501 & 60 | iness in Florida, if prior to registration.) 08.502 F.S. to determine penalty liability) |
| 7. 60 East Simpson Avenue | |
| Jackson, WY 83001 | O6 |
| | |
| 8. If limited liability company is a manager-r | managed company, check here the managing members or managers are as follows: The managing members or managers are as follows: |
| 9. The name and usual business addresses of | the managing members or managers are as follows: |
| Wendy Chiri | 2: 26 ORIDA |
| P.O. Box 2869 | |
| Jackson, WY 83001 | |
| · | ne than 90 days old, duly authenticated by the official having custody of records in A photocopy is not acceptable. If the certificate is in a foreign language, a sust be submitted.) |
| 11. Nature of business or purposes to be cond | ducted or promoted in Florida: |
| Property management) | |
| Manker 1 | Mus |
| —————————————————————————————————————— | or an authorized representative of a member. |
| , | 08.408(3), F.S., the execution of this document constitutes lities of perjury that the facts stated herein are true ; |
| Wandy Chiri | • |

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 Co | mpany is: | | | |
|----|--------------------------------------|-----------|--|---|--|
| ٧ | VSNH2, LLC | | | - | |

2. The name and the Florida street address of the registered agent and office are:

| Karen Maller | en e | . · <u></u> |
|----------------------|--|-------------|
| | (Name) | _ |
| 1 Progress Plaza, N | lo. 1210 | ~ . |
| Florida Street Addre | ess (P.O. Box <u>NOT</u> ACCEPTABLE) | |
| St. Petersburg, | FL 33701 | |
| | City/State/Zip | |

Having been named as registered agent and to accept service of process for the above stated timited in 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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

State of Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

I, JOSEPH B. MEYER, Secretary of State of the State of Wyoming, do hereby certify that WSNH2, LLC, a limited liability company organized under the laws of the State of Wyoming, did on 01/06/2006, file its Articles of Organization in the Office of the Secretary of State of Wyoming, and is in good standing at the date of this certificate.

I FURTHER CERTIFY that this certificate is not to be construed as an endorsement, recommendation, or notice of approval of the limited liability company's financial condition or business activities and practices, as this information is not available from the records of this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 8th day of April A.D., 2006.



Secretary of State

By Christinia M. Lean