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CHISTON OF CORPORATIONS

OR MAY -2 PM 3: 23

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Morningside Dade City, LL (Name of	-C f Limited Liability Company)	
	ed Liability Company for Authorization to Transare submitted to register the above referenced foida	
Please return all correspondence concerning t	this matter to the following:	
Sam D. Norton, Esqu		
	(Name of Person)	06 H
Norton, Hammersley, L	opez & Skokos, P.A.	SIGHT F
(Firm/Company)		一~ 5
		OF STATIONS DRPORATIONS PM 3: 23
1819 Main Street, Suite 610		_ 3.5 至
	(Address)	3
Sarasota, FL 34236		
(Ci	ty/State and Zip Code)	<del></del>
For further information concerning this matte	r, please call:	
Sam D. Norton, Esquire	at ( 941 ) 954-4691	
(Name of Person)	(Area Code & Daytime Telephone Nu	mber)
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\Boxed{1}\$125.00 Filing Fee \$\Boxed{1}\$130.00 Filing F Certific		ee, Certificate s & Certified Copy

## 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: Morningside Dade City, LLC (Name of Foreign Limited Liability Company) 2. Michigan (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) April 20, 2006 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") None prior to registration. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 31000 Northwestern Highway, Suite 220 Farmington Hills, Michigan 48334 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: MDC Manager, LLC, a Michigan limited liability company, Manager 31000 Northwestern Highway, Suite 220 Farmington Hills, Michigan 48334 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Investment

Signature of a member or 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.)

Typed or printed name of signee

Sam D. Norton, Authorized Representative

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

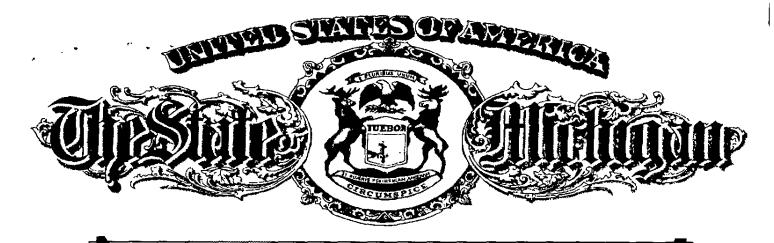
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Com	pany is:	
Morningside Dade City, LLC		- <u>-</u> -
2. The name and the Florida street address	of the registered agent and office are:	06 K.Y.
Sam D. Norton, Esc	quire	FIARY OF CU
	(Name)	93
1819 Main Street, Suite 610  Florida Street Address (P.O. Box NOT ACCEPTABLE)		PH 3: 24
Sarasota	FL 34236 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.

(Signature)

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



Michigan Department of Labor & Economic Growth

Lansing, Michigan

This is to Certify That

MORNINGSIDE DADE CITY, LLC

SECRETARY OF STATE US
CHAISION OF CORPORATIONS
CHAISION OF CORPORATIONS
CHAISION OF PAN 3: 24

was validly organized on April 20, 2006 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 24th day of April, 2006

Bureau of Commercial Services

,Director