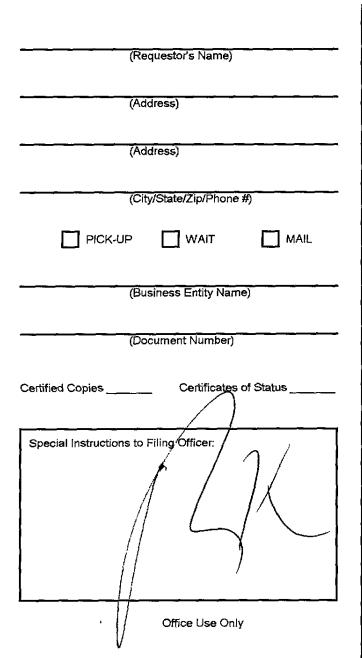
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200072654712

DIVISION OF CONFORMION



ACCOUNT NO. : 072100000032

REFERENCE : 107009

COST LIMIT : \$ 125.00

AUTHORIZATION :

ORDER DATE : May 15, 2006

ORDER TIME : 7:04 PM

ORDER NO. : 107009-005

CUSTOMER NO: 7165873

FOREIGN FILINGS

NAME: SHOPPES OF FOUR CORNERS,

L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: SARA LEA -- EXT# 2914

EXAMINER:

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:

Shoppes of Four (Corners, L.L.C.		. 🖆
	(Name of Foreign Limited L	ability Company)	克 铝 6
Delaware (Jurisdiction under company is organiz	the law of which foreign limited liability (sed)	applied for (FEI number, if applicable)	TALLA TAS
5-11-0 (Dat	6 (5. de of Organization)	(Duration: Year limited liability company vexist or "perpetual")	will cease to Tox
	(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)	<u> </u>
4200 W. Cypress	Street Suite 444		
Tampa, Fl 33607		f Principal Office)	
	(Succi Address o	is a smest par Ossee)	
If limited liabil	ity company is a manager-managed o	company, check here 🕡	
The name and	usual business addresses of the mana	ging members or managers are as follo	ws:
Joseph J. Raueni	horst, 225 N.E. Mizner Boulevard, Suite 675	i, Boca Raton, FL 33432	
Barry W. Greeni	field, 4200 West Cypress Street, Suite 444, 1	Tampa, FL 33607	
		nys old, duly authenticated by the official having on is not acceptable. If the certificate is in a foreign	
	cate under oath of the translator must be submi		
. Nature of busi	ness or purposes to be conducted or	promoted in Florida: Acquire, develop,	
finance and hold r	cal estate projects and all other lawful activi	ties	
	Signature of a member or an auti (In accordance with section 608.408(3), F.S. an affirmation under the penalties of perjur Joseph J. Rauenhorst	norized representative of a member, the execution of this document constitutes y that the facts stated herein are true.)	
	Typed or printed a	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.

2. The name a	and the Florida street add	dress of the registered agent and office are	:
	Corporation Service Com	npany	
		(Name)	
	1201 Hays Street		
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	
		City/State/Zip	
		and to accept service of process for the abo in this certificate, I hereby accept the appo	

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHOPPES OF FOUR CORNERS, L.L.C." 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 FIFTEENTH DAY OF MAY, A.D. 2006.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SHOPPES OF FOUR CORNERS, L.L.C." WAS FORMED ON THE ELEVENTH DAY OF MAY, A.D. 2006.



Farriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4745222

DATE: 05-15-06