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Florida Department of State

Division of Corporations Public Access System

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DIVISION OF (Certificate of Status	perties of Florid 1 1 05	a, L.L.

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

SUBJEC	T: Tolicson Land Inve	stment Properties o	of Florids, L.L.C.	
			Limited Liability Company)	
Florida,"		nce, and check a	d Liability Company for Authorization to Transact Businers submitted to register the above referenced foreign linda	
Please ret	urn all comesponden	ce concerning ti	his matter to the following:	
· 3+	Davis H. Smith, Be	iquire	e de la	
			(Name of Person)	
	Kaufman & Rothfe	eder, P.C.	· ·	
			(Firm/Company)	
	Post Office Box 45	i40		
	· · · · · ·	-	(Address)	
	Montgomery, Alab	ama 36103-4540		
		(Cit	ty/State and Zip Code)	
For furthe	r information concer	ming this matter	; please call:	
D	avis H. Smith		at (334) 244-1111	
	(Name	of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS:		S:	STREET ADDRESS:	
Division of Corporations		ns	Division of Corporations	
- •	O. Box 6327		Clifton Building	
Tallahassee, FL 32314			2661 Executive Center Circle Tallahassee, FL 32301	

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

IN COMPLIANCE WITH SECTION GOSSIE, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 Tolleson Land Investment Properties of Florida, L.L.C. (Name of Foreign Limited Liability Company) 2. Delaware 20 - 488/3 43 (FEI mumber, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 4 May 15, 2006 Perpetual (Duration: Year limited liability company will coase to exist or "perpetual") (Date of Organization) Date first transacted business in Florids, if prior to registration.) les sections 608.501 & 608.502 F.S. to determine penalty liability) 7 903 Jamigan Streat Perry, Georgia 31069 (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: W. J. Wood Post Office Box 970 Perry, Georgia 31069 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 extent investments Signature of a member or an authorized representative of a member.

(in accordance with section 608.408(3), P.S., the execution of this document constitutes an affirmation under the penalties of perjuty that the facts stated herein are true.)

Typed or printed name of signee

W. J. Wood, Manager

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.

_	lieson Land Investme				
2.	The name and the	Florida street address of the registered agent and office are:		06 X	
	* .	C T Corporation System	字形	MAY	~
		(Name)	AS	26	=
	•	•	SE	0.	'n
		1200 South Pine Island Road	ju Çi	圣	C
	,	Florida Street Address (P.O. Box NOT ACCEPTABLE)	STATE	10:0	
•	.)	Plantation, Florida 33324	\$ 77	, 0	
		City/Smta/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.

By:

(Signature)

1. The name of the Limited Liability Company is:

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

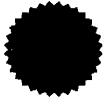


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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOLLESON LAND INVESTMENT PROPERTIES OF FLORIDA, 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 TWENTY-FIFTH DAY OF MAY, A.D. 2006.

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



Warriet Smith Windson, Socretary of State

4158695 8300

060506381

AUTHENTICATION: 4775700

DATE: 05-25-06