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Division of Corporations

Prom:

Account Name

: MACFARLANE FERGUSON & MCMULLEN

Account Number : 076077001654 Phone

: (813)273-4304

Fax Number

: (813)273-4396

ORIDA/FOREIGN LIMITED LIABILITY CO

Island Park II, LLC

Certificate of Status	1
Certified Copy	1
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIBITLY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of Forci			
2. Georgia		3		· · · · · · · · · · · · · · · · · · ·
(Jurisdiction under the company is organized	te law of which foreign limit d)	cd liability	(FEI number, if	applicable)
4: March 16, 20	307	_{5.} Per	petual	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
(Date	of Organization)	, (Du exis	ration: Year limited liabil t or "perpetual")	lity company will cease to
5. Upon filing				
	(Date first transacted bu (See sections 608.501 &	isiness in Florida, if 1 608.502 F.S. to deter	orior to registration.) mine penalty liability)	
7. 780 Old Ros	well Place, Ste 100	· 		.80.0
Roswell, Geo	rgia 30076	•		Ž., *
	(Str	cet Address of Princi	pal Office)	<u> </u>
R If limited liabilit	y company is a manager	-managed compa	ny check here [7]	e e e e
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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.

	Ellen M. Macfarlane
	, (Name)
•	The second of th
	201 N. Franklin Street, Suite 2000
•	Florida Street Address (P.O. Box NOT ACCEPTABLE)

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.

Eller Macfarlar (Signature)

1. The name of the Limited Liability Company is:

Island Park II, LLC

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\$ 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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SECRETARY OF STATE

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Control No. 07023226

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, Karen C Handel, the Secretary of State and the Corporations Commissioner of the State of Georgia, hereby certify under the seal of my office that

ISLAND PARK II, LLC

a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on 03/16/2007 by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on March 16, 2007

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Heren Chandel

Karen C Handel Secretary of State