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LORIDA/FOREIGN LIMITED/LYABILITY CO

IPF-GP IX, LLC

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PAGE 01/04

CT CORP

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

IN COMPLIANCE WITH SECTION BRISIB, FLORIDA STATUTISE THE FOLLOWING IS SUBMITTED TO RECESTER A FORESCEN LIMITED LIABILITY COMPANY TO TRANSACTEUSINESS IN THE STATE OF FLORIDA: 1. IPF-GP DX, LLC (Name of Foreign Limited Liability Company) 2. Delaware (Jurisdiction under the law of which foreign limited liability (FKI number, (f applicable) company is organizad) 5. perpetual 4 4/26/2007 (Duration: Your limited liability company will cause to (Date of Organization) exist or "perpetual") 6. upon registration (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 3424 Peachtree Road, N.B., Suite 1500, Atlanta, GA 30326 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows: 1DI Georgia Holdings, Inc., 3424 Peachtree Road, N.E., Suite 1500, Atlanta, GA 30325 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: to act as general partner of a Delaware limited partnership that will do business in Plorida Signature of a member of an authorized representative of a member. (In acquisitance with susting \$69.408(3), F.S., the execution of this document constitutes an affirmation under my ponalties of parjury that the facts stated herein are true.)

FLOST - QUINTS OF Training Online

Typed or printed name of signee

Timothy J. Gunter, Treasurer

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.

IPF-GP IX, LLC			
2. The name and the Florida	street address	of the registered agent and office are:	
.	C1	Corporation System	
		(Name)	-
	1200	South Pine Island Road	,
F	iorida Street Ado	ress (P.O. Box <u>NOT</u> ACCEPTABLE)	- 75 N
	Plan	itation, Florida 33324	• • •
		City/State/Zip	• • •
relating to the proper and com	plete performa egistered agen	ther agree to comply with the provisions of ince of my duties, and I am familiar with at I as provided for in Chapter 608, Florida S Caniler F. Aultman Institut Secretary	nd accept the
(Signature			
	\$ 100.00		
	\$ 25.00 5 30.00		
	5 500	Certificate of Status (outline)	

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CI CORP



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I, HARRIST SMITE WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "IPF-GP IX, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAMARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF APRIL, A.D. 2007.

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

4341735 8300 07048**491***6*



Harrie Smila Hindre

Nomet Smith Window, Secretary of S AUTHENTICATION: 5631465

DATE: 04-27-07