# M07000004376

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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1203 Governors Square Blvd. Tallahassee, FL 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsc#utions.com

July 24, 2007

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301 OT JUL 24 PM 3: 37

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Re:

Order #: 6983823 SO

Customer Reference 1: 56400.072530 Customer Reference 2: Post Entities

Dear Department of State, Florida:

Please obtain the following:

PBP Lake Susannah Condo Land, LLC (GA) Registration Florida

PBP Lake Susannah Condo Land, LLC (GA) Certificate of Status-Foreign Florida

PBP Lake Susannah Condo Land, LLC (GA) Cert Copy of Application for Authority-Foreign Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.



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1203 Governors Square Blvd. Tallahassee, Ft. 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

Sincerely,

Ashley A Mitchell Fulfillment Specialist Ashley.Mitchell@wolterskluwer.com TALL PHANTS SEE, FLORIDA

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 10	•
TRANSACT BUSINESS IN FLORIDA	
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA  IN COMPLIANCE WITH SECTION 608-508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER'A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	<b>)</b>
PBP Lake Susannah Condo Land, LLC	•
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")	
, Georgia	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. July 20, 2007 5. perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
5,	٠
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 4401 Northside Parkway, Suite 800	
Atlanta, GA 30327	
(Street Address of Principal Office)	L
3. 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:	
Post Services, Inc.	
4401 Northside Parkway, Suite 800	
Atlanta, GA 30327	
O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in ne jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fiveign language, a carsistion of the certificate under eath of the translator must be submitted.)  1. Nature of business or purposes to be conducted or promoted in Florida:	
Minoung (16) (State	
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.)  Sherry W. Cohen, Executive Vice President	
Typed or printed name of signee	
of ham as browner as	

#### 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.

PBP Lake Susannah (	ie Limited Liability Comp	any is:		
<del></del>	le, the alternate name to b	e used in the state (	of Florida is:	
		<del></del>		
2. The name and	the Florida street address	of the registered ag	ent and office are:	
	CT	Corporation System		
		(Name)		
	1200 !	South Pine Island Road	I	
_	Florida Street Add	ress (P.O. Box NOT	CCEPTABLE)	
	Plantation	FI.	33324	
<del>-</del>		City/State/Zip		
liability company a agent and agree to relating to the prop obligations of my p	d as registered agent and to to the place designated in the act in this capacity. I furth wer and complete performa assistion as registered agent	his certificate, I here her agree to comply nce of my duties, an	by accept the appointmen with the provisions of all d I am familiar with and c	nt as registere statutes accept the
By: Mau	Corporation System  Edward  (Signature)	Marie Edwa	rds Asst. Secretary	
	\$ 100.00 \$ 25.00 \$ 30.00		legistered Agent	

Certificate of Status (optional)

\$ 5.00

Control No. 07060397

## STATE OF GEORGIA

### Secretary of State

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

#### CERTIFICATE OF EXISTENCE

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

#### PBP LAKE SUSANNAH CONDO LAND, LLC

#### **Domestic Limited Liability Company**

was formed or was authorized to transact business on 07/20/2007 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 24th day of July, 2007

Karen C Handel Secretary of State

Laun CHandle

Certification Number: 1542808-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp