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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Mainscape Sarasota LLC (Name of Limited Liability Company)			
The enclosed "Application by Foreign Limited Liability Company for Authorization t Florida," Certificate of Existence, and check are submitted to register the above refere liability company to transact business in Florida			
Please return all correspondence concerning this matter to the following:			
Bruce Torrance			
(Name of Person)			
Mainscape			
(Firm/Company)			
13418 Briton Park Rd.	¥=		
(1.143.305)			
Fishers, IN 46038 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Bruce Torrance at (317) 339-0	3/87		
(Name of Person) (Area Code & Daytime Telepi	ione Number)		
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\int\\$\$125.00 \text{Filing Fee} \text{\$\sum_{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{Filing Fee}} & \$\$\text{\$\texi\\$\$\text{\$\tex	Filing Fee, Certificate of Status & Certified Copy		

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

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‡	7112/07 (Date of Organization)	5. (Durati	perpetue on Year United liable "perpetual")	al ility company will o	cease to
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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.

1 The rame of the Limited Liebility Commons in

1. The haine of the Elimed Enothty Company is.	
Mainscape Sarasota, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	O7 JU SECK TALL/
2. The name and the Florida street address of the registered agent and office are:	FILED 27 PA HASSEE,
David Mazanowski	FLORIDA
1879 Von Care 7+. Florida Street Address (PLO. Box NOT ACCEPTABLE)	-
Naples FL 34119 City/State/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.

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

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

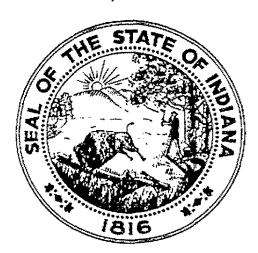
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

MAINSCAPE SARASOTA, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on July 11, 2007, and was in existence or authorized to transact business in the State of Indiana on July 26, 2007.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twenty-Sixth Day of July, 2007.

TODD ROKITA, Secretary of State

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