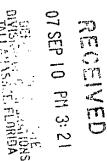
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(Requestor's Name)	_
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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(Business Entity Name)	_
(Document Number)	
(2004)	
Certified Copies Certificates of Status	—
Special Instructions to Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 10, 2007

FLORIDA FILING & SEARCH SERVICES

TALLAHASSEE, FL

SUBJECT: PASCO PARTNERS, L.L.C.

Ref. Number: W07000044629



We have received your document for PASCO PARTNERS, L.L.C. and the authorization to debit your account in the amount of \$155.00. However, the document has not been filed and is being returned for the following:

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent ofthe managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 707A00053563

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Drive, Suite A Tallahassee, FL 32301

PHONE: (850) 216-0457; FAX: (850) 216-0460

DATE: 09-10-07

NAME: PASCO PARTNERS, L.L.C.

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST: \$155

RETURN: CERTIFIED COPY

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/BAY

Please Keep Original file dark

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION FO TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 608303, FLORIDA STATUTES, THE FOLLOWING E SUBMITTED TO REGISTER A FORESON LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. PASCO PARTNERS, L.L.C.	
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION FO TRANSACT BUSINESS IN FLORIDA	
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORESON, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1 PASCO PARTNERS, L.L.C.	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") PASCO PARTNERS GEORGIA, L.L.C.	
(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.")	
2. Georgia 3. 26-0707068	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. <u>08/13/2007</u> 5. <u>Perpetual</u>	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. Upon qualification	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 2303 Cumberland Parkway, SE, #100	
Atlanta, GA 30339	
(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:	
Scott D. Hawkins - 2303 Cumberland Parkway, SE, #100, Atlanta, GA 30339	
The Wilkinson Family, LLC - 2303 Cumberland Parkway, SE, #100,	
Atlanta, GA 30339	
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 fibreign 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:	
Owner/operator of a multi-family residential complex.	
1: 4	
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 penaltics of perjury that the facts stated herein are true.) Chris Henderson, Authorized Representative	
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Typed or printed name of signee

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that	t we are the Managers and/or Managing
Members of Pasco Partners, L.L.C).
	ed Liability Company)
a limited liability company duly organized	and existing under the laws of
Georgia	
(State or Country of Organization)	
Because the name of this foreign limited his	sbility company does not satisfy the
requirements of the s. 608.406, P.S., the lim	nited liability company hereby adopts the
following name to transact business in the	state of Florida:
Pasco Partners Georgia, L.L.C.	
(Name to be used by limited liability company in Florida. Company, L-L-C., or LLC.)	NOTE: Name must end with Limited Liability
Date: September 11, 2007	•
Signature(s) of Manager(s) and/96 Managiz	ng Member(s):
XIIII) Haw hum	Scott D. Hawkins, Manager
	
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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.

If name unavailable, the alternate name to be used in the state of Florida is:			
2. The name	and the Florida street address of the registered agent and office are:		
	NRAI Services, Inc.		
	(Name)		
	2731 Executive Park Drive, Suite 4		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Weston, FL 33331 _{FL}		
	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)

Control No. 07068538

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

PASCO PARTNERS, L.L.C.

Domestic Limited Liability Company

was formed or was authorized to transact business on 08/13/2007 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 30th day of August, 2007

Karen C Handel Secretary of State

faun C. Handel

Certification Number: 1612367-1 Reference:

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