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COVER LETTER

Registration Section

ECT: Island Pointe Partners, LLC	Limited Lightity Company)	_
(Name of	Limited Liability Company)	
	I Liability Company for Authorization to Tree submitted to register the above referenceda	
return all correspondence concerning the	nis matter to the following:	
Eric L. Weiss		
***************************************	(Name of Person)	
Schulten, Ward	& Turners, LLP	SECRETARY OF STATE TALLAHASSEE, FLORID
	Schulten, Ward & Turners, LLP (Firm/Company)	
		775
260 Peachtree S	treet, Suite 2700	OP THE
	(Address)	— ÿ
Atlanta, Georgia 3	0303	
	y/State and Zip Code)	
rther information concerning this matter	, please call:	·
Eric L. Weiss, Esq.	at (404) 688-6800	
(Name of Person)	(Area Code & Daytime Telephor	e 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	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: i Island Pointe Partners, 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.") 2. Georgia (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 4. December 21, 2000 5. Perpetual (Duration: Year limited liability company will cease t (Date of Organization) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1049 Powers Ferry Road Marietta, Georgia 30067 (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: IP Management, Inc., Manager - 1049 Powers Ferry Road, Marietta, Georgia 30067 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: Real Estate

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.)

Eric L. Weiss, Esq.

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.

Island Pointe Pa	rtners, LLC		
	able, the alternate name to be us	sed in the state of Florida is:	100 20
2. The name an	d the Florida street address of th	ne registered agent and office are:	A 9: S
	PARACORP INCORPORATED)	
	<u> </u>	(Name)	•
	236 EAST 6th AVENUE		
	Florida Street Address	(P.O. Box NOT ACCEPTABLE)	
	TALLAHASSEE	32303 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.

Paracorp Incorporated

Rv.

(Signature)

1. The name of the Limited Liability Company is:

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

CONSENT OF THE MANAGING MEMBER OF ISLAND POINTE PARTNERS, LLC

The undersigned, being the managing member (the "Managing Member") of ISLAND POINTE PARTNERS, LLC (the "Company"), hereby consents to and adopts the following resolution as the action of the Company and hereby directs that this written consent to such action be filed with the proceedings of the Company:

WHEREAS, the Company desires to do business in Florida as Island Pointe Apartments, LLC.

NOW, THEREFORE, the Managing Member approves the registration of the Company to do business in Florida as Island Pointe Apartments, LLC and authorizes Matthew W. Hicks, as Vice President of the Managing Member, or any attorney for the Company to execute all documents and take all such action as they may determine reasonable and necessary in connection with the hereinabove described matters.

(signature on next page)

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IN WITNESS WHEREOF, the undersigned has set his hand and seal effective as of the day of November, 2007.

MANAGING MEMBER:

IP MANAGEMENT, INC., a Georgia corporation

Ву:

Matthew W. Hicks, Vice President

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

ISLAND POINTE PARTNERS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 12/21/2000 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 13th day of November, 2007

Karen C Handel Secretary of State

faun Chaudel

Certification Number: 1850087-1 Reference:

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