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DIVISION OF CORPORATIONS

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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Boca Del Vista, LLC (Name of Limit	ed Liability Company)		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please return all correspondence concerning this matter to the following:			
Peter J. Lozicki			
(Name of Person)			
Rhoades McKee			
(Firm/Company)			
161 Ottawa NW, Suite 600			
(Address)			
Grand Rapids, MI 49503			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Peter J. Lozicki	at (616) 235-3500		
(Name of Person)	(Area Code & Daytime Telephone Number)		
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: State of Status State Stat			

APPLICATION BY FÓREIGN 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:

Boca Del Vista, 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.} Michigan _{3.} 20-2962865
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. May 3, 2004 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to
exist or "perpetual")
6. (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 161 Ottawa Avenue NW, Suite 600
Grand Rapids, MI 49503
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here \[\frac{\frac{1}{2}}{\frac{1}{2}} \]
9. The name and usual business addresses of the managing members or managers are as follows:
Gia A. Lozicki
10210 Waterside Oaks Drive
Tampa, FL 33647
 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 of 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.) Gia A. Lozicki

Typed or printed name of signee

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 name of the Limited Liability Company is:	
Boca Del Vista, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	<i>~</i> 1
2. The name and the Florida street address of the registered agent and office are:	SECRETARY NATISION OF CO. DS FEB 18
Gia A. Lozicki	<u> </u>
(Name)	PH 2:
10210 Waterside Oaks Drive	FIGHS
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tampa, FL 33647 _{FL}	
City/State/Zip	

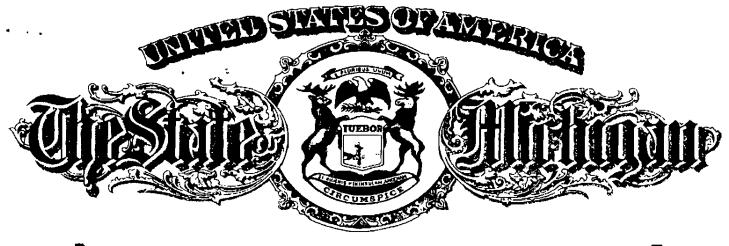
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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)



Michigan Department of Labor & Economic Growth

Lansing, Michigan

This is to Certify That

BOCA DEL VISTA, LLC

was validly organized on May 3, 2004 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

> In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 31st day of January, 2008

Bureau of Commercial Services

Director,