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SECRETARY OF STATE

T. HAMPTON

MAY 2 2 2008

EXAMINER



ACCOUNT NO. : 072100000032

REFERENCE: 580362 4320229

AUTHORIZATION

COST LIMIT

ORDER DATE: May 21, 2008

ORDER TIME: 4:34 PM

ORDER NO. : 580362-005

CUSTOMER NO: 4320229

FOREIGN FILINGS

NAME: SOUTH POINTE AT FT. MYERS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cindy Harris -- EXT# 2937

EXAMINER:

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

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of South Pointe At Ft. Myers, LLC
(Name of Limited 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 liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
South Pointe At Ft. Myers, LLC (Georgia)
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: May21, 2008
Signature(s) of Manager(s) and/or Managing Member(s):
Selig Enterprises, Inc.
<i>V</i>
By: William J. Dawkins, Secretary
· · · · · · · · · · · · · · · · · · ·
ACEC

CR2E122 (7/07)

MAY 22 AM 9: 08

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:

1. <u>S</u>	outh Pointe At Ft. Myers, LLC
C	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	th Pointe At Ft. Myers, LLC (Georgia)
conse	me unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability any," "L.L.C.," "LLC.")
2. G	eorgia 3.
(Ju cor	risdiction under the law of which foreign limited liability (FEI number, if applicable) apany is organized)
4. 3	18/2008 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. <u>L</u>	pon filing
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1	100 Spring Street, NW, Suite 550
A	tlanta, Georgia 30309
	(Street Address of Principal Office)
8. If	limited liability company is a manager-managed company, check here
9. T	ne name and usual business addresses of the managing members or managers are as follows:
S	elig Enterprises, Inc.
1	100 Spring Street, NW, Suite 550
A	tlanta, Georgia 30309
the jur	tached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in sdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a tion of the certificate under oath of the translator must be submitted.)
11. N	Vature of business or purposes to be conducted or promoted in Florida:
R	eal estate development
	V

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.)

Selig Enterprises, Inc. by: William J. Dawkins, Secretary

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.

If name unavailable, the alternate name to be used in the state of Florida is:					
2. The nam	ne and the Florida street add	lress of the registered agent and	d office are:		
	Hugo H. de Beaubl	len			
	, <u>ang an an an</u> an	(Name)	and the state of the sequence was believed to the state of the sequence of the		
	322 North Magnoli	a Avenue			
	Flonda Stree	et Address (P.O. Box NOT ACCEPTA	81.1:1		
	Orlando	FL 32802-008 Cuy-State Zip	3 7		
	10 at 1	Cny State Zip	and the state of t		
ltability com agent and p relating for	npany at the place designated before to not in this capacity. In the proper and complete perhal my position as registrated the state of the property of the pr	and to accept service of process to this certificate. I hereby accel that her agree to comply with the formance of my duties, and I amagent as provided for in Chapter when the comments of the process of the comments of the co	rept the appointment as registered to provivious of all statutes familiae with and accept the		
	(Signature)		⊑ 8		
Hugo H.	e Beaublen	A AA - L'Man Eng for Amelican	CAE I		
Hugo H.	Beaublen \$10	0.00 Filing Fee for Applicant 5.00 Designation of Register 0.00 Certified Copy (options	IONE TARY LAHASSE red Agem		

Control No. 08022503

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

South Pointe At Ft. Myers, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 03/18/2008 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 21st day of May, 2008

Karen C Handel Secretary of State

Faren C. Handel

Certification Number: 2928506-1 Reference: Biernath/004487 Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp