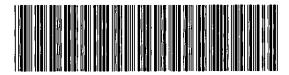
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EXAMINER

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SECKETARY OF STATE
NAME OF STATE

OFFEBIGE

OFFEBIG



ACCOUNT NO. : 072100000032

REFERENCE : 893841 7692177

JOEEN 16 PALLIS

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: February 16, 2009

ORDER TIME : 10:01 AM

ORDER NO. : 893841-005

CUSTOMER NO: 7692177

FOREIGN FILINGS

NAME: WINDOVER FORT MYERS BEACH, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER:

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:

	ver Fort Myers Be				~ 11 -01 Y ~ 11	
,	eign Limited Liability Com	pany; must include "	Limited Liability C	ompany," "L.L.(C.," or "LLC.")	
	, enter alternate name adopt gers or managing members a ""LLC.")					
2. Massac (Jurisdiction unde company is organi	husetts r the law of which foreign lized)	3	26-4225249 (FB) r	number, if applic	cable)	
4. Februa	nte of Organization)	5	Perpet (Duration: Year lin exist or "perpetual	nited liability cor	mpany will cease to	parage Conf.
6. N/A	L				. 4.0 %	
-	(Date first transacte (See sections 608.50)	d business in Plorid 1 & 608.502 F.S. to	a, if prior to registra determine penalty li	tion.) ability)	ELS. E	FILE 1: 15
713 E1a	Street, Manchest	er. MA 01944	<u></u>			9 F.
					THE STATES	主
	· · · · · · · · · · · · · · · · · · ·	(Street Address of I	Principal Office)		20	
8. If limited liab	ility company is a mana	iger-managed co	mpany, check he	ere X	ORIDA	5
9. The name and	l usual business address	ses of the managi	ng members or i	nanagers are a	as follows:	
Steven B.	. Dodge	13 Elm	Street, Mand	hester, MA	01944	
Lee R. De	ellicker	13 Elm	Street, Mano	hester, MA	01944	
Justin R	. Belliveau	13 E1m	Street, Mand	hester, MA	01944	
the jurisdiction under	iginal certificate of existence, rthe law of which it is organi ificate under oath of the trans	zed. (A photocopy is	notacceptable. If the			ords in
11. Nature of bu	siness or purposes to b	e conducted or pr	romoted in Flori	da: to ow	m, operate,	
lease,	improve, develop a	ind sell real	estate			
		OP				•
	Signature of a me (in accordance with set an affirmation under the	tion 608.408(3), F.S.,	the execution of this	document constitu	iber. tos	-
			elliveau, Mar	ager		
	Ty	ped or printed na	ame 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:
Windover Fort Myers Beach, LLC
If name unavailable, the alternate name to be used in the state of Florida is:
N/A
2. The name and the Florida street address of the registered agent and office are:
Corporation Service Company
(Name)
1201 Hays Street
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tallahassee, FL 32301
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.

Kimberly B. Moret as its agent

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



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

February 10, 2009

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

WINDOVER FORT MYERS BEACH, LLC

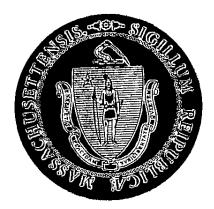
in accordance with the provisions of Massachusetts General Laws Chapter 156C on **February 10, 2009.**

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that, said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: STEVEN B. DODGE, LEE R. DELLICKER, JUSTIN R. BELLIVEAU

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: STEVEN B. DODGE, LEE R. DELLICKER, JUSTIN R. BELLIVEAU

The names of all persons authorized to act with respect to real property listed in the most recent filing are; STEVEN B. DODGE, LEE R. DELLICKER, JUSTIN R. BELLIVEAU



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Min Travino Galein