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ACCOUNT NO. : 072100000032

REFERENCE: 391809 4304045

AUTHORIZATION

COST LIMIT :

ORDER DATE : May 14, 1997

\$285.00

ORDER TIME : 9:43 AM

ORDER NO. : 391809-005

CUSTOMER NO:

4304045

900002181119--6

CUSTOMER: Bobbie J. Morrow, Legal Asst

Arnall Golden & Gregory 2800 One Atlantic Center 1201 West Peachtree Street

Atlanta, GA 30309

FOREIGN FILINGS

NAME:

FRENCH QUARTER II, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Paula K. Kendrick

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 THE STATE OF FLORIDA:			نځ کې
French Quarter II, LLC			
(Name of foreign limited liability compared "L.C." if not so contained in the name a	ny must end with the wo at present. Please Note:	rds "limited company" or their at L.L.C. is not an acceptable suffix	breviation in Florida.)
Delaware		3. Applied for	
(Jurisdiction under the law of which for company is organized)	reign limited liability	(FEI number, if applicab	e)
April 22, 1997	5. Perpetua	al	
(Date of Organization)	(Duration: Yea or "perpet	ar limited liability company will ce ual")	ase to exist
Upon qualification			
(Date first transacted business in Flo	orida. (See sections 608.501,	608.502, and 817.165, F.S.)	
c/o French Quarter Holding	, Inc.		
2870 Pharr Court South, NW		······································	
 	, #2410, Atlanta, ddress of principal office	······································	
(Street ac	ddress of principal office	, and business address of ea	ch managing
(Street ac List and indicate in title space pro member (MGRM) or manager (MG	ddress of principal office	, and business address of ea	ch managing
(Street ac List and indicate in title space promember (MGRM) or manager (MG (attach additional page if necessary)	ddress of principal office ovided the name, title iR). It is not necessar TITLE:	, and business address of ea y to list members.	
(Street action (Street action)	ddress of principal office ovided the name, title iR). It is not necessar TITLE:	, and business address of ea y to list members.	
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(Street action of the court of	ddress of principal office ovided the name, title iR). It is not necessar TITLE:	, and business address of ea y to list members.	
(Street accepted) List and indicate in title space promember (MGRM) or manager (MG (attach additional page if necessary) NAME AND ADDRESS: French Quarter Holding, Inc. 2870 Pharr Court South, NW #2410	ddress of principal office ovided the name, title iR). It is not necessar TITLE:	, and business address of ea y to list members.	
(Street accepted) List and indicate in title space promember (MGRM) or manager (MG (attach additional page if necessary) NAME AND ADDRESS: French Quarter Holding, Inc. 2870 Pharr Court South, NW #2410	ddress of principal office ovided the name, title iR). It is not necessar TITLE:	, and business address of ea y to list members.	

Filing Fee: \$ 52.50 for Application

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN TO LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of	a member of
FRENCE QUARTER II, LLC	_ deposes and says:
1) the above named limited liability company has at leas	et two-members
2) the total amount of cash contributed by the member(s) is \$ 3,000,000 .
3) if any, the agreed value of property other than cash c \$ A description of the proper	•
4) the total amount of cash or property anticipated to be \$3,000,000 . This total includes amount	•

Signature of a member or authorized representative of a member (in accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that that facts stated herein are true.)

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, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is:	FRENCH QUARTER II, LLC	五 000
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		2:11
		The name of the limited liability company is: FRENCE QUARTER II, LLC

2.	The name	and	address	of	the	registered	agent	and	office	is:
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	(Name)
1201 Hays Street	
(P.O. Box or	Mail Drop Box NOT acceptable)
Callahassee, Florid	a 32301

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.

By: Signature)

5-15-97 (Date)

Filing Fee: \$ 35 for Designation of Registered Agent

State of Delaware Office of the Secretary of State

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I. EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF THE STATE OF DELAWARE. DO HEREBY CERTIFY 'FRENCH QUARTER II, LLC' IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF APRIL, A.D. 1997.



Edward J. Freel, Secretary of State

AUTHENTICATION:

8429751

971128841

2738310 8300

DATE:

04-22-97