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Mail out NEW FILINGS Profit NonProfit Limited Liability	Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Director Change of Registered Agent	Certificate of Status PECEIVED 97 NOV 21 PM 1: 27
Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication	Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Director Change of Registered Agent Dissolution/Withdrawal	RECEIVED 97 NOV 21 PH 1: 27 DIVISION OF CORPORATIO

LAW OFFICES OF LONG, RAGSDALE & WATERS

a professional corporation telephone (423) 584-4040 telefax (423) 584-6084

RECEIVED ALTON LIGHTSEY

NOV 21 1997

JOHN B. WATERS, JR. **

1111 Northshore Drive, NW Suite S-700 Knoxville, Tennessee 37919-4074

*Also admitted in Arizona **Also admitted in District of Columbia

Via Fed<u>eral</u> Ex**p**ress

CHRISTOPHER A. HALL R. LOUIS CROSSLEY, JR. KANDYCE K. MORGAN November 20, 1997

> Alton Lightsey, Esq. Carlton, Fields 215 South Monroe Street Suite 500 tallahassee, Florida 32301

ROBERT L. CROSSLEY

IOHN B. WATERS III

J. MICHAEL IVENS

C. PAUL HARRISON

CHRISTINA C. GREY

SCOTT D. SULTZER DIANA M. THIBODAUX

DAVID WILSON LONG DENNIS B. RAGSDALE

Enclosed please find the following:

- Application by Foreign Limited Partnership for Authorization to Transact Business in 1. Florida with respect to Ft. Myers Apartments, L.P.;
- Certificate of Existence for Ft. Myers Apartments, L.P.; 2.
- Application by Foreign Limited Liability Company for Authorization to Transact Business 3. in Florida with respect to Ft. Myers Apartments, LLC;
- Certificate of Existence for Ft. Myers Apartments, LLC; 4.
- A Consent to Use of Name executed by Ft. Myers Apartments, LLC with 5. acknowledgment from the Tennessee Secretary of State; and
- A check in the amount of \$337.50 to cover the costs of filing fees.

Please sign as Registered Agent in the spaces indicated and walk through the Secretary of State's Office for filing tomorrow pursuant to our conversation today.

Thank you very much for your assistance in this matter. If you have any questions, please feel to give me a call.

Sincerely,

LONG, RAGSDALE & WATERS, P.C.

By: Christina C. Grey

ccg\ltr\light.sey

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

	THE THE PROPERTY OF THE PROPER	TO A STATE THE TH	E FOLLOWING IS SUBMITTED TO	REGISTER A FOREIGN
IN COMPLIANC. LIMITED LIABILI	E WITH SECTION 000-505, FLORI ITYCOMPANYTO TRANSACT BUS	INESS IN THE STAT	TE OF FLORIDA:	SET T
1 Ft. My	ers Apartments, LLC		The ited company" or their abbi	expation "L.C." if not
(Name of fore	eign limited liability company mo in the name at present.)	ist end with the wo	ords "limited company" or their abbi	SSS P
2. Tennes	see	<u> </u>	Applied for	icobde)
(Jurisdiction	under the law of which foreign lin	nited liability	(FEI number, if appl	loadie, N
company is o	rganized)		a a a a a a a a a a a a a a a a a a a	温温い
4. Novemb	er 17, 1997	5.	65 years Duration: Year limited liability con	nnany will cease to
	(Date of Organization)	· (exist or "perpetual")	
			Tro	
6No bu	siness has been transac	ted yet in Fl	orida by the LLC tions 608.501, 608.502, and 817.15	5, F.S.)
	(Date first transacted business	III Florida. (See See	Strong Coop 17, 1	
7 813 No	orthshore Drive, Suite	201		
/·		· · · · · · · ·		
Knoxv	ille, TN 37919	Street address of p	ringinal office)	<u> </u>
	•			
	till and byginess address (of each managin	g member[MGRM] or manag	er[MGR]who
8. List name,	ge the foreign limited liability	by company in F	Jorida: (attach additional page	if necessary)
		LA COTTDOMY	TOTICA. (actaon about	
WIII IIIanag	ge the foreign immed habin	ty company 222		
•		TITLE:	NAME & ADDRESS:	TITLE:
•	NAME & ADDRESS:	TITLE: Chief	NAME & ADDRESS:	
•		TITLE:		TITLE:
•	NAME & ADDRESS: Joseph W. Reed	TITLE: Chief	NAME & ADDRESS:	TITLE:
•	NAME & ADDRESS:	TITLE: Chief	NAME & ADDRESS: R. Gary Higgins	TITLE:
•	Joseph W. Reed 813 Northshore Drive	TITLE: Chief	NAME & ADDRESS: R. Gary Higgins	TITLE:
•	Joseph W. Reed 813 Northshore Drive Suite 201	TITLE: Chief	NAME & ADDRESS: R. Gary Higgins 813 Northshore Drive Suite 201	TITLE:
•	Joseph W. Reed 813 Northshore Drive	TITLE: Chief	NAME & ADDRESS: R. Gary Higgins 813 Northshore Drive	TITLE:
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•	Joseph W. Reed 813 Northshore Drive Suite 201	TITLE: Chief	NAME & ADDRESS: R. Gary Higgins 813 Northshore Drive Suite 201	TITLE:
N	Joseph W. Reed 813 Northshore Drive Suite 201 Knoxville, TN 37919	TITLE: Chief Manager	NAME & ADDRESS: R. Gary Higgins 813 Northshore Drive Suite 201	TITLE: Secretary

having custody of records in the state 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.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorize	d representative of a member	er of Ft. Myers	7 7
Apartments, LLC	certifies:		100 21 FORETA
1) the above named limited liability co	ompany has at least two me	mbers;	21 PH TARY OF
			STATE STATE
2) the total amount of cash contributed		,	\$1,000.00
3) if any, the agreed value of property (A description of the property is att	ached and made a part here		
and 4) the total amount of cash and prope by member(s) is	rty contributed and anticipa	nted to be contrib	suted \$1,000.00
(This total includes amounts from	2 and 3 above.)	:	
4		1	
Lond	w. Rud		
	nber or an authorized repection 608.408(3), Florida Statute affirmation under the penalties		
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Joseph W.	Reed, Chief Manager	oficae	
	Typed or printed name of	opidiree	

Filing Fee: \$250.00 for Application and Affidavit

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.

	•			; y	Fig.	Z	1
2. The name and t	he Florida street addres	s of the registe	red agent an	d office are:	全品	3	1000000
		- 1.		-1	25	2	() () () () () () () () () () () () () (
	Alton Lights	sey	* .	. i	F P	PK	M
		(Name)			FECT ST	ふ	
		1		1	골드	ū	
•	215 South Mo	nroe Street		1	D.E.	. —	
	Florida street add	dress (P.O. Box <u>N</u>	OT ACCEPTAB	-D			
e e				1 1 1			
	Tāllahassee	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.

(Signature)

1. The name of the Limited Liability Company is:

Filing Fee: \$ 35 for Designation of Registered Agent

Secretary of State Corporations Section James K. Polk Building, Suite 1800 Nashville, Tennessee 37243-0306

ISSUANCE DATE: 11/17/1997 REQUEST NUMBER: 97321109 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 11/17/1997 STATUS: ACTIVE CORPORATE EXPIRATION DATE: 11/17/2062 CONTROL NUMBER: 0340639 JURISDICTION: TENNESSEE

CAPITAL FILING SERVICE INC. 7051 HWY 70 SOUTH NO 333 NASHVILLE, TN 37221

REQUESTED BY: CAPITAL FILING SERVICE INC. 7051 HWY 70 SOUTH NO 333 NASHVILLE, TN 37221

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "FT. MYERS APARTMENTS, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID: THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

ON DATE: 11/17/97

\$100.00

FROM: CAPITAL FILING SERVICE, INC. 7051 HWY 70 S

\$20.00 \$120.00

NASHVILLE, TN 37221-0000

RECEIPT NUMBER: 00002206078 ACCOUNT NUMBER: 00101230

RECEIVED:

TOTAL PAYMENT RECEIVED:



RILEY C. DARNELL SECRETARY OF STATE