# 199800000000074

CT Corporation System			
Requestor's Name 660 East Jefferson Str	reet		
Address Tallahassee, FL 3230		700002427027	_
City State Zip	Phone	700002437837 -02/23/9801059028_	<b>a</b> _
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CURPURA	TION(S) NAME	7000024978377	-7
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() Foreign	() Dissolutio	on/Withdrawal () Mark	
() Limited Partnership	() Annual Re	eport X) Other LLC	
() Reinstatement () Fictitious Name	() Name Reg.	istration () Change of R.A.	
Certified Copy	() Photo Co		-
( ) Call When Ready ( ) Walk In	() Call if Pro () Will Wait		
() Mail Out	() will want	() Pick Up	
Name			
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W.P. Verifier	(JJ	10,0,	1

CR2E031 (1-89)

# 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.	Parkway Portfolio I LLC				
•	(Name of foreign limited liability compan "L.C." if not so contained in the name at	y must end with present.)	the words "limited company" or th	neir abbreviation	
2.	Mississippi		3. applied for but		
	(Jurisdiction under the law of which foreign company is organized)	gn limited liabili	y (FEI number, if ar	oplicable)	
4.	February 12, 1998	5 Dec	ember 31, 2050		
	(Date of Organization)		n: Year limited liability company v petual")	vill cease to exist	
6.	Upon filing				
٠.	(Date first transacted business in Florida	. (See sections 608.	501, 608.502 and 817.155, F.S.)		
7.	188 East Capitol Street, Su	ite 1000		-	
	Jackson, Mississippi 39201 (Street address of principal office)				
	(Street address o	i principal office	,		
8.	List and indicate in title space promember [MGRM] or manager [MG (attach additional page if necessary)	vided the nam iR]. It is not n	ecessary to list members.		
	NAME & ADDRESS: TIT	LE:	NAME & ADDRESS:	TITLE:	
-	PARKWAY PROPERTIES, L.P.	MGRM	N/A	N / A	
-	-N/A-	/ PX			
_	188 East Capitol Street	, Suite 10			
			00	_	
-	Jackson, MS 39201		00	_	
	Jackson, MS 39201			<del>-</del> 	
-	Jackson, MS 39201		00	<del>-</del> 	
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•	Jackson, MS 39201	<del>,</del>	00		
•	Jackson, MS 39201				

Filing Fee: \$ 52.50 for Application

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized	representative of a member of Parkway
Portfolio I LLC	deposes and says:
1) the above named limited liability comp	one pany has at least two members
2) the total amount of cash contributed	
3) if any, the agreed value of property o \$0 A description	ther than cash contributed by member(s) is of the property is attached and made a part hereto.
4) the total amount of cash or property \$100.00 This total include	anticipated to be contributed by member(s) is es amounts from 2 and 3 above.
Signature of a member or a (In accordance with section 608.40 constitutes an affirmation under the per	suthorized representative of a member.  8(3), Florida Statutes, the execution of this affidavit enalties of perjury that the facts stated herein are true.)  Parkers, True, factories of perjury that the facts stated herein are true.)  Parkers of Parkers

Filing Fee: \$52.50 for 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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the limited liability compan	y is:
	PARKWAY PORTFOLIO I LLC	<u>-</u>
2.	The name and address of the registered a	gent and office is:
	C T CORPORA	TION SYSTEM
		lame)
	c/o C T CORPORATION, 1200	South Pine Island Road,
		not acceptable)
	Plantation, Florida 33324	
	(City/s	State/Zip)
**		to ment assert of menants for the ghous
state	ed limited liability company at the place d	to accept service of process for the above lesignated in this certificate, I hereby accept
the o	appointment as registered agent and agre	ee to act in this capacity. I further agree to
comp	ply with the provisions of all statutes related duties, and I am familiar with and accept	ing to the proper and complete performance of t the obligations of my position as registered
ager		The conganona of my position as registered
	_ C T CORPORATION SYSTEM	
	$\bigcap$	
	INN	2/19/98
J	(Signature)  J. L. Miles, Asst. Secretary	(Date)

FILINGFEE: \$35 for Designation of Registered Agent

## State of Mississippi

#### Secretary of State's Office Eric Clark

Secretary of State Jackson, Mississippi

#### CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

PARKWAY PORTFOLIO I LLC

Formed February 12,1998

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

188 EAST CAPITOL STREET, SUITE 1000 P O BOX 24647 JACKSON MS 39225-2464

and that the registered agent at that address is:

PARKWAY PROPERTIES, INC.

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

> Given under my hand and seal of office February 19,1998

Eric Clark

ERIC CLARK, Secretary of State

