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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STÂTUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Name of foreign limited liet !!!				
"L.C." if not so contained in the na	company must e ame at present.)	end with the words "limited company	" or their abbreviat	ion
Delaware		·	-	
(Jurisdiction under the law of which company is organized)	ich foreign limite	3. Applied Formed liability (FEI number, if applied liability)	oplicable)	<del></del> -
August os, 1998 (Date of Organization		5. December 31, 2047	<u>.</u>	
(Sale of Organizatio	on)	(Duration: Year limited liability cease to exist or "perpetual")	company will	
Upon Qualification				
(Date first transacted	l business in Flor	rida. (See sections 608.501, 608.502	and 817.155 FS)	<del></del>
c/o EIG Operating Partne	ership. T.P.	, lll East Wayne Street, Su	01/1100,1.5.)	
		111 East wayne Street, Su	ite 500,	**
Fort Wayne, Indiana 4680	2			
	(Street ac	idress of principal office)		<del></del>
will manage the foreign limite	address of each ed liability com	menaging member [MGRM] or	manager [MGR	] who
will manage the foreign limite  * The company is managed  NAME & ADDRESS:	address of each d liability com by its sole TITLE:	managing member [MGRM] or ipany in Florida: (attach addition member.  NAME & ADDRESS:	manager [MGR nal page if neces TITLE:	] who sary)
* The company is managed NAME & ADDRESS:	by its sole TITLE:	member.	nat page if neces	] who sary)
* The company is managed NAME & ADDRESS:  IG Operating Partnership, P., 111 East Wayne Street lite 500, Fort Wayne. IN	by its sole TITLE:	member.	nat page if neces	] who sary)
* The company is managed NAME & ADDRESS:  IG Operating Partnership, P., 11I East Wayne Street tite 500, Fort Wayne, IN	by its sole TITLE:	member.	nat page if neces	] who sary)
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* The company is managed NAME & ADDRESS:  IG Operating Partnership, P., 111 East Wayne Street lite 500, Fort Wayne. IN	by its sole TITLE:	member.	nat page if neces	who sary)  SECRETARY OF CORP DIVISION OF CORP
* The company is managed NAME & ADDRESS:  IG Operating Partnership, P., 111 East Wayne Street lite 500, Fort Wayne. IN	by its sole TITLE:	member.	nat page if neces	who sary)  SECRETARY OF STA
* The company is managed	by its sole TITLE:	member.	nat page if neces	who)  SECRETARY OF STATE SIGN OF CORPORATIONS  OR ALIC - 7 PM L: 16
* The company is managed NAME & ADDRESS:  IG Operating Partnership, P., 111 East Wayne Street lite 500, Fort Wayne. IN	by its sole TITLE:	member.	nat page if neces	who sary)  SECRETARY OF STATE DIVISION OF CORPORATIONS

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

### State of Delaware

#### Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EIG RUSKIN, 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 FIFTH DAY OF AUGUST, A.D. 1998.

AND I\_DO\_HEREBY\_FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

NOT BEEN ASSESSED TO DATE.

OB ALIG - 7 PM 4: 16

Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

9234896

DATE:

08-05-98

2929400 8300

## 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:	
_	EIG Ruskin, LLC	
2.	The name and the Florida street address of the registered agent and office are:	
	C T CORPORATION SYSTEM	SECRET DIVISION 98 AUG
	(Name)	ORETT
	Florida street address (P.O. Box NOT ACCEPTABLE)	F CORPC
		PM 4: 16
	Plantation FL 33324 (City/State/Zip)	<b>6</b> 75
Havi	ing been named as registered agent and to accept agents of	

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.

C T CORPORATION SYSTEM

Filing Fee: \$35 for Designation of Registered Agent

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

Th	e undersigned member or authorized representative of a member of		
_	EIG Ruskin, LLC certifies:		
1)	the above named limited liability company has at least two members;		
2)	the total amount of cash contributed by the member(s) is	§ <u>1,000</u>	.00 ;
3)	if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.)	; <u>-0</u>	<u> </u>
	the total amount of cash and property contributed and anticipated to be contributed	<u>1,000</u>	.00
	EIG Operating Partnership, L.P., by EIG Realty, Inc., its sol	e	
	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 the facts stated herein are true.)		
	Todd M. Jacobs, Secretary/Treasurer	98 AU	SECF
	Typed or printed name of signee	( -7 PM 4: 16	FILED RETARY OF STATE N OF CORPORATION

Filing Fee: \$250.00 for Application and Affidavit