M9800000 1361



ACCOUNT NO. : 07210000032

REFERENCE: 020480 4304492

AUTHORIZATION :

COST LIMIT :

ORDER DATE: November 3, 1998

ORDER TIME : 10:44 AM

ORDER NO. : 020480-005

CUSTOMER NO: 4304492

CUSTOMER:

Ruth Cordes, Legal Assistant

Rudnick & Wolfe Law Offices

Suite 1800

203 North Lasalle Street

Chicago, IL 60601

500002691505--3

FOREIGN FILINGS

NAME:

LANSBROOK VILLAGE PHASE II.

L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder

Name Availability

Document

Examiner

Updater

Updater

Verlifyer

Acknowledgeme

W. P. Verifyer

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

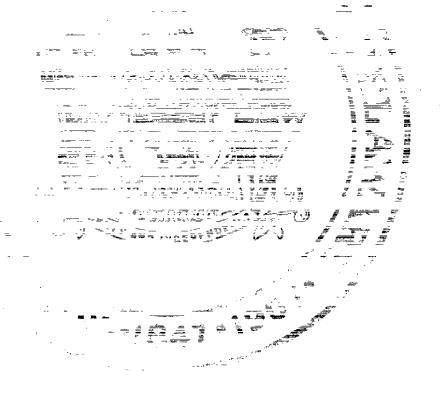
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(I	Name of foreign limit	ed liability company)	
Delaware	3	36-4169538	
diction under the law of which foreign limited liability any is organized)		(FEI number, if applicable)	
November 2, 1998	. 5	December 31, 2048	
(Date of Organization)		(Duration: Year limited liability co exist or "perpetual")	ompany will cease
Upon Qualification			·
(Date first transacted busine	ess in Florida. (See se	ctions 608.501, 608.502, and 817.155	, F.S.)
200 West Madison Street, 37th	Floor		
Chicago, IL 60606			<u></u>
name, title, and business address manage the foreign limited liabil	ity company in F	g member[MGRM] or manage	r[MGR]who if necessary) TITLE:
name, title, and business address manage the foreign limited liabil NAME & ADDRESS: Pritzker Residential	of each managin	g member[MGRM] or manage orida: (attach additional page i	if necessary)
manage the foreign limited liabiling NAME & ADDRESS:	of each managin ity company in Fl	g member[MGRM] or manage orida: (attach additional page i	if necessary)
nanage the foreign limited liabil NAME & ADDRESS: Pritzker Residential	of each managin ity company in Fl	g member[MGRM] or manage orida: (attach additional page i	if necessary)
NAME & ADDRESS: Pritzker Residential Equities, L.P. 200 West Madison Street	of each managin ity company in Fl	g member[MGRM] or manage orida: (attach additional page i	if necessary)
NAME & ADDRESS: Pritzker Residential Equities, L.P. 200 West Madison Street 37th Floor	of each managin ity company in Fl	g member[MGRM] or manage orida: (attach additional page i	TITLE:
NAME & ADDRESS: Pritzker Residential Equities, L.P. 200 West Madison Street 37th Floor	of each managin ity company in Fl	g member[MGRM] or manage orida: (attach additional page i	TITLE:
NAME & ADDRESS: Pritzker Residential Equities, L.P. 200 West Madison Street 37th Floor	of each managin ity company in Fl	g member[MGRM] or manage orida: (attach additional page i	TITLE:
NAME & ADDRESS: Pritzker Residential Equities, L.P. 200 West Madison Street 37th Floor	of each managin ity company in Fl	g member[MGRM] or manage orida: (attach additional page i	TITLE:
NAME & ADDRESS: Pritzker Residential Equities, L.P. 200 West Madison Street 37th Floor	of each managin ity company in Fl	g member[MGRM] or manage orida: (attach additional page i	TITLE:

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LANSBROOK VILLAGE PHASE II, L.L.C." 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 FOURTH DAY OF NOVEMBER, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



98 NOV 19 PM 1: 10

2962251 8300 981424321



Edwff Jul 11-04-98

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

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:	
Lansbrook Village Phase II, L.L.C.	
2. The name and the Florida street address of the registered agent and office are:	
Corporation Service Company	86 Sinid
(Name)	EGRETA 100V
1201 Hays Street Florida street address (P.O. Box NOT ACCEPTABLE)	Fayer PI
Tallahassee, FL 32301	STATE OR ATTORS
City/State/Zip	9,

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.

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member of	r authorized representative of a member of	Lansbrook Village
Phase II, L.L.C.	certifies:	
1) the above named limited	liability company has at least one member;	
2) the total amount of cash of	contributed by the member(s) is	\$ <u> </u>
 if any, the agreed value o (A description of the propand 	f property other than cash contributed by member perty is attached and made a part hereto.)	er(s) is \$;
4) the total amount of cash a by member(s) is (This total includes amount)	and property contributed and anticipated to be contributed and anticipated anticipated and anticipated ant	ontributed \$ 4,356,000
partnership, S		
By: X	of a member or an authorized representative	
(In accorda	nce with section 608.408(3), Florida Statutes, the execu-	tion of this
	Robbin Cohen Typed or printed name of signee	PH REGISTAN
	- AL or E A music of prightee	o 95 cm

Filing Fee: \$250.00 for Application and Affidavit