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	ME(S) AND DOCUMENT NUMBER(S	Fund II LLC
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Mail Out Will Wait	NEED TODAY	Certificate of Status  Certificate of Good Standing  Certificate of Good Standing
Photocopy		ARTICLES ONLY
Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	Certificate of FICTITIOUS NAME  FICTITIOUS NAME SEARCH
Annual Report Fictitious Name Name Reservation	REGISTRATION/QUALIFICATION   Foreign	CORP SEARCH  DIVISION OF TALLAHAS

Date:

PAGE

## 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-Covenant Apartment Fund II, LLC (Name of foreign limited liability company) Delaware (Jurisdiction under the law of which foreign limited liability company is organized) December 23, 1998 5. Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") N/A (Date first transacted business in Florida, (See sections 608.501, 608.502, and 817.155, F.S.) 2727 Fletcher Avenue West Tampa, FL 33618 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 9. The usual business addresses of the managing members or managers are as follows: Covenant Property Trust, LLC 224 White Bridge Road Nashville, TN 37209 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: Serving as Manager of Sailwinds, LLC, a Delaware limited liability company doing business in the State of Florida Signature of a member or an authorized representative of a member. (In accordance with section 608,408(3), F.S., the execution of this document constitutes an affirmation upder the penalties of perjury that the facts stated herein are true.) Covenant Property Trust, LLC, a Delaware limited liability company

Typed or printed name of signee

A. Scarola

\_ Its: Chief Manager

## 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:	
Covenant Apartment Fund II, LLC	
2. The name and the Florida street address of the registered agent and office are:	-
NRAI Services, Inc.	
(Name)	
526 East Park Avenue	
Florida street address (P.O. Box NOT ACCEPTABLE)	
Tallahassee FI 32301 Fc 9	
City/State/Zip	7
Having been named as registered agent and to accept service of process for the above stated limited in this control agent and agree to act in this capacity. I further agree to comply with the provisions of all accept the obligations of my position as registered agent as provided for in Chapter 608, F.S	C # 3. The second of the secon
Ed Handa Root. Ser	. T
(Orginalate)	

Filing Fee for Application \$ 100.00 Designation of Registered Agent \$ 25.00 \$ 30.00 Certified Copy (optional) Certificate of Status (optional) 5.00

## State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "COVENANT APARTMENT FUND 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 EIGHTH DAY OF NOVEMBER, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COVENANT APARTMENT FUND II, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF DECEMBER, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE
BEEN PAID TO DATE.

99 NOV -9 PM 3: 35
99 NOV -9 PM 3: 35
STATE
FRANCE FLORIDA

Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

0068969

991473939

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2983877

DATE:

11-08-99