1 1 1	(JUI)	UL.] [/ /	//
C T CORPORATI N SYST	M Melanie Strickland			' /	V
660 East Jefferson St lequestor's Name	reet				(
Tallahassee. Florida	32301				
Address (850) 222-1092			•		
Dity State Zip	p Phone	;	300 <u>00</u> 3	: 0414 4 0/990107	13
CORPO	RATION(S) NAME				**125.
					. •
		The Market Control			
-		क्षेत्र (१८ छ - व		74. 17. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19	4
	TMW Porth As	Nisons, UC	<u> </u>	NO.	ZO M
	The second section of the second			0 0	(U
	து கொண்டு கொண்குகின் இது இது இது கொண்டு இ ச்சிரிற்ற	Track of the second	آ درد ۱۹۶۰ مایسواله در سد آ	PH POP	=
				7.001	П
() Profit () NonProfit	() Amendm	ent	() Meræ		
() NonProfit Limited Liability	Company "			5NG	D 4
() NonProfit	Company () Dissolution	on/Withdrawal	() Mark	49 99 N	Ü 4
() NonProfit Limited Liability () Foreign () Limited Partnership	Company () Dissolution () Annual F	on/Withdrawal	() Mark	16 SECTE	Ö T
() NonProfit Limited Liability () Foreign () Limited Partnership () Reinstatement	() Dissolution () Annual F () Fict. F	on/Withdrawal Report iling t. Filing Cand	() Mark () Other () Changel () UCC-	149 99 NOV POCA	
() NonProfit Limited Liability () Foreign () Limited Partnership	() Dissolution () Annual P	on/Withdrawal Report iling t. Filing Cand	() Mark () Other () Chang	149 99 NOV PO BON 2:	FILED
() NonProfit () Limited Liability () Foreign () Limited Partnership () Reinstatement () Limited Liability () Certified Copy () Call When Ready	() Dissolution () Annual Partnership () Fict. F () Photo Co. () Call if Pro-	on/Withdrawal Report Iling t. Filing Cand opies oblem	() Mark () Other () Changel () UCC- () CUS	149 99 NOV DO BY 2: 53	
() NonProfit Limited Liability () Foreign () Limited Partnership () Reinstatement () Limited Liability () Certified Copy () Call When Ready Walk In	() Dissolution () Annual F () Fict. F Partnership () Fic	on/Withdrawal Report Iling t. Filing Cand opies oblem	() Mark () Other () Chang sel () UCC- () CUS	149 99 NOV DO BY 2: 53	
() NonProfit Limited Liability () Foreign () Limited Partnership () Reinstatement () Limited Liability () Certified Copy () Call When Ready Walk In () Mail Out	() Dissolution () Annual Partnership () Fict. F () Photo Co. () Call if Pro-	on/Withdrawal Report Iling t. Filing Cand opies oblem	() Mark () Other () Changel () UCC- () CUS () After	149 99 NOV DO BY 2: 53	FILED
() NonProfit Limited Liability () Foreign () Limited Partnership () Reinstatement () Limited Liability () Certified Copy () Call When Ready Walk In	() Dissolution () Annual Partnership () Fict. F () Photo Co. () Call if Pro-	on/Withdrawal Report Iling t. Filing Cand opies oblem	() Mark () Other () Changel () UCC- () CUS () After	149 99 NOV PO BY 2: 53	FILED
() NonProfit Limited Liability () Foreign () Limited Partnership () Reinstatement () Limited Liability () Certified Copy () Call When Ready Walk In () Mail Out Name Availability Document	() Dissolution () Annual Partnership () Fict. F () Photo Co. () Call if Pro-	on/Withdrawal Report Iling t. Filing Cand opies oblem	() Mark () Other () Changel () UCC- () CUS () After Pick U	149 99 NOV PO BY 2: 53	TI COP
() NonProfit Limited Liability () Foreign () Limited Partnership () Reinstatement () Limited Liability () Certified Copy () Call When Ready Walk In () Mail Out Name Availability Document Examiner	() Dissolution () Annual F () Fict. F Partnership () Fic () Photo Co () Call if Pro () Will Wait	on/Withdrawal Report iling t. Filing Cancopies oblem	() Mark () Other () Changel () UCC- () CUS () After Pick U	149 99 NOV PO GH 2:53	TI COP
() NonProfit Limited Liability () Foreign () Limited Partnership () Reinstatement () Limited Liability () Certified Copy () Call When Ready Walk In () Mail Out Name Availability Document	() Dissolution () Annual Position () Fict. For partnership () Photo Control () Call if Proceeding () Will Wait	on/Withdrawal Report iling t. Filing Cancopies oblem	() Mark () Other () Changel () UCC- () CUS () After Pick U	149 99 NOV PO GH 2:53	TI COP

CR2E031 (1-89)

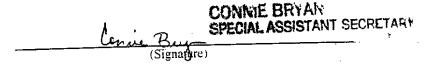
	WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN Y COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
	TY ADVISORS, LLC
1.	(Name of foreign limited liability company)
Georgia (Jurisdiction und company is orga	ler the law of which foreign limited liability 3. — Hop lied Fol (FEI number, if applicable) nized)
4. February	7 3, 1999 Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon filin	g
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
75500	Interstate North Parkway, Suite 200
Atlar	nta, Georgia 30328-4662
	(Street address of principal office)
	(Street address of principal office) bility company is a manager-managed company, check here asiness addresses of the managing members or managers are as follows:
9. The usual bu	usiness addresses of the managing members or managers are as follows:
5500	Interstate North Parkway, Suite 200
Atlar	nta, Georgia 30328-4662
the jurisdiction una	original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in der the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ertificate under oath of the translator must be submitted.)
11. Nature of b	ousiness or purposes to be conducted or promoted in Florida: real estate management
	By: TMW Real Estate Group, LLC, its sole member *By:
	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 under the penalties of perjury that the facts stated herein are true.)
	Typed or printed name of signee Stephen F. White - Vice President

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:		
TMW REALTY ADVISORS, LLC >∞	 _	
2. The name and the Florida street address of the registered agent and office are:	01 AON 66	7
CT Corporation System (Name)	P 2	
	2: 53	
c/o Corporation System, 1200 South Pine Island Rose Florida street address (P.O. Box NOT ACCEPTABLE)	ñ	
Plantation FL 33324 City/State/Zip		
Chylothia 2.p		

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 as provided for in Chapter 608, F.S..



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

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : K93130387

CONTROL NUMBER : K905109

DATE INC/AUTH/FILED: 02/03/1999

JURISDICTION : GEORGIA

PRINT DATE : 11/09/1999

FORM NUMBER : 211

9 NOV 10 PM 2: 53 SECRETASSEE FLORIDA

HUNTON & WILLIAMS
MARIE J. WOOLDRIDGE
600 PEACHTREE ST., STE. 4100
ATLANTA, GA 303082216

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

TMW REALTY ADVISORS, LLC A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Ally Cop

Secretary of State