# Document Number (shift) 0000 1788

C T Corporation System	i · · · · · ·	,
Requestor's Name 660 East Jefferson Str	reet	·
Address Tallahassee, FL 32301	(850) 222-1092	
City State Zip Phone  CORPORATION(S) NAME		7000030427275 -11/12/9901063022 ****125.00 ****125.00
Me	I / Kan Am II,	L.L.C. \$50 00 11/13
()Profit ()NonProfit ≾) Limited Liability Car	() Amendment	() Merger
<b>⇔</b> Foreign	() Dissolution/Wi	ithdrawal () Marker 5
( ) Limited Partnership ( ) Reinstatement	( ) Annual Report ( ) Reservation	The same of the sa
() Certified Copy	() Photo Copies	() CUS / G/S
( ) Call When Ready Walk In ( ) Mail Out	() Call if Problem () Will Wait	() After 4:30 Pick Up
Name Availability Document	11/12	PLEASE RETURN EXTRA COPY(S) FILE STAMPED
Examiner		
Jpdater		THANK YOU! CONNIE BRYAN
Verifier	<del></del>	
Acknowledgment		2000 2000
N.P. Verifler		THANK YOU! GONNEE BREVAN

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: MEI/Kan Am II, L.L.C. (Name of foreign limited liability company) (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 7/7/99 perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") Upon Qualification (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 1300 Wilson Boulevard, Suite 400 Arlington, Virginia 22209 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here [x] 9. The usual business addresses of the managing members or managers are as follows: 1300 Wilson Boulevard, Suite 400 Arlington, Virginia 22209 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: ownership of interest, direct or indirect, in commercial retail business 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.)

Thomas E. Frost, Executive Vice President of Mills Enterprises, Inc.

Typed or printed name of signee the Manager of MEI/Kan Am II, L.L.C.

#### 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:		
MEI/Kan Am II, L.L.C.		
2. The name and the Florida street address of the registered agent a	nd office are: TALLA	
CT Corporation System		
(Name)	SSEE P. I	
1200 South Pine Island Road	Fleet St.	
Florida street address (P.O. Box NOT ACCEPT	TABLE) RATE &	
Plantation, Florida 33324		
FL City/State/Zip	<del></del>	

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..

**KEVIN J. GALLAGHER** 

ASSISTANT VICE PRESIDENT \$ 100.00 Filing Fee for Application

25.00 Designation of Registered Agent

30.00 **Certified Copy (optional)** 

5.00 Certificate of Status (optional)

## 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 "MEI/KAN AM I, 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 FIFTH DAY OF NOVEMBER, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

NOT BEEN ASSESSED TO DATE.



Edward J. Freel, Secretary of State

3066602 8300

- AUTHENTICATION:

0067476

DATE: ...

11-05-99

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