M05000005162

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filling Officer:





900058563659

05 SEP 19 PM 4: 00

DEPARTMENT OF STATE ACCOUNT FILING COVER SHEET

Account Number	FCA00000017	
Reference: (Sub Account) Date:	9/19/05	
Requestor Name:	Carlton Fields	10
·		300
Address:	Post Office Drawer 190 Tallahassee, Florida 32302	*
Telephone:	(850) 224-1585	
Contact Name:	Kim Pullen, CLA (ext. 5261)	
Corporation Name:	8530 Cedi	ros LLC
Entity Number:		
Authorization:	fin flet	len
Certified Copy New Filings Fictitious Name	Plain Stamped Copy Amendments	Certificate of Status Annual Report Registration
(X) Call When Ready	(X) Call if Problem	() After 4:30
(X)Walk In	()Will Wait	(X) Pick Up
A S : 1	Matter:	

TAL#501656.1

TOPIZATIONATO

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	l T is	bility Company)
· · · · · · · · · · · · · · · · · · ·	1 1.14	onity Company)
California	3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	,	(FEI number, if applicable)
March 24, 1999	5.	perpetual
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
Upon registration		
(Date first transacted business in I (See sections 608.501 & 608.502 F.	lori S. to	da, if prior to registration.) o determine penalty liability)
16830 Ventura Blvd., Suite 100		
Encino, CA 91436		
(Street Addres	s of	Principal Office)
If limited liability company is a manager-manage	d co	ompany, check here
The name and usual business addresses of the ma	nag	ing members or managers are as follows:
Take B 192-14 17920 Market Blod Cale 100 Paris C		21427
John P. Walsh, 16830 Ventura Blvd., Suite 100, Encino, C	A 9	1436
Attached is an original certificate of existence, no more than 90 jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be suf	py is	not acceptable. If the certificate is in a foreign language, a
jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be suf	py is omiti	s not acceptable. If the certificate is in a foreign language, a led.)
jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be sufficient of the translator must be sufficient of business or purposes to be conducted or	py is omiti	s not acceptable. If the certificate is in a foreign language, a led.)
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jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be sufficient of business or purposes to be conducted or	pyis omit or p	s not acceptable. If the certificate is in a foreign language, a led.)
jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be sufficient of the translator must be sufficient of business or purposes to be conducted ownership Signature of a position or an a	py is omition or p uthers.	romoted in Florida: Real estate investment and orized representative of a member.

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.

The name and the F	lorida street address o	of the registered a	gent and office are:
		CFRA, LLC	
		(Name)	
	4221 W	V. Boy Scout bouleva	ırd
	Florida Street Addr	ess (P.O. Box NOT	ACCEPTABLE)
	Tampa	FL	33607
		City/State/Zip	

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 of registered agent as provided for in Chapter 608, Florida Statutes.

By: (Signature)

\$ 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 California

Secretary of State

CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the 24th day of March, 1999, 8530 CEDROS LLC, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 25, 2005.



BRUCE McPHERSON Secretary of State