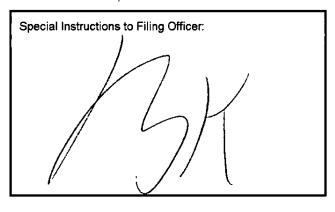
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| (Requestor's Name)                      |  |  |  |  |  |
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| (Address)                               |  |  |  |  |  |
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| (Address)                               |  |  |  |  |  |
| (13333)                                 |  |  |  |  |  |
|   |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |
|   |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| •                                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
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| (Document Number)                       |  |  |  |  |  |
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DATE:

06-02-06

NAME:

FOUNTAIN COURT LESSEE LLC

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST:

\$125 + \$5 + \$30= \$160

RETURN: GOOD STANDING & CERTIFIED COPY

ACCOUNT: FCA000000015

**AUTHORIZATION:** 

ABBIE/PAUL HOD

THE SECRETARY OF STRAIN OF

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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:

| FOUNTAIN COURT L                                   | ESSEE LLC<br>(Name of Poreign Limited                                      | 1.14           | hility Company)   |
|--|--|----------------|---|
|  | (Mainte of Poteign Dimined   | , L/IA         | only company)   |
| Delaware   |  | 3.             | (FBI number, if applicable)   |
| Jurisdiction under the la<br>company is organized) | w of which foreign limited liability                                       |                | ( PEI number, it applicable)  |
| June 1, 2006                                       |  | 5.             | Perpetual   |
| (Date of (   | Organization)  |                | (Duration: Year limited liability company will cease to exist or "perpetual") |
| upon qualification                                 |  |                |   |
|  | (Date first transacted business in F<br>(See sections 608.501 & 608.502 F. | lorle<br>S. to | da, if prior to registration.) determine penalty liability)                   |
| c/o Sitt Asset Manage                              | ment, LLC  |                |   |
| One Penn Plaza, Suit                               | te 3430, New York, NY 10119  |                |   |
|  | (Street Addres   | s of           | Principal Office)   |
| If limited liability c                             | ompany is a manager-manage   | d co           | ompany, check here  |
| The name and usual                                 | l business addresses of the ma   | nag            | ing members or managers are as follows:                                       |
|  | •  | _              | <u>-</u>  |
| Sitt Asset Manageme                                | ent, LLC, One Penn Plaza, Suite  | 343            | 30, New York, N Y 10119   |
|  |  |                |   |
|  |  |                |   |
|  |  |                |   |
| Attached is an original or                         | ertificate of existence no more than 90                                    | ) day          | s old, duly authenticated by the official having custody of recor             |
|  |  |                | s not acceptable. If the certificate is in a foreign language, a              |
|  | inder ceth of the translator must be sul                                   |                |   |
|  |  |                | . 44 ma 11  |
| Nature of business                                 | or purposes to be conducted of   | or p           | romoted in Florida:   |
| real estate investment                             |  |                |   |
|  | 21   |                | ,   |
| 3  | Signature of a member or an a  | utho           | orized representative of a member.  |
| (  |  | F.S.,          | the execution of this document constitutes                                    |
|  | Eric Hoberman, Authorized Repr   | • •            | ·   |
| •  | Typed or printe  | d n            | ame of signee   |

## 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:  |
|----------------------------|--|
| F                          | UNTAIN COURT LESSEE LLC  |
| 2.                         | The name and the Florida street address of the registered agent and office are:  |
|                            | NRAI Services, Inc.  |
|                            | (Name)   |
|                            | 2731 Executive Park Drive, Suite 4   |
|                            | Florida Street Address (P.O. Box NOT ACCEPTABLE)   |
|                            | Weston FL 33331  |
|                            | City/State/Zip   |
| lial<br>age<br>rele<br>obl | ing been named as registered agent and to accept service of process for the above stated limited ility company at the place designated in this certificate, I hereby accept the appointment as registerent and agree to act in this capacity. I further agree to comply with the provisions of all statutes ting to the proper and complete performance of my duties, and I am familiar with and accept the gations of my position as registered agent as provided for in Chapter 608, Florida Statutes.  Al Services, Inc.  (Signature) |

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



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### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FOUNTAIN COURT LESSEE 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 SECOND DAY OF JUNE, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FOUNTAIN COURT LESSEE LLC" WAS FORMED ON THE FIRST DAY OF JUNE, A.D. 2006.

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

Warriet Amith Minds
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4792026

DATE: 06-02-06

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