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Certified Copies	_ Certificates	of Status
Special Instructions to I	iling Officer	
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ACCOUNT NO. : 072100000032

REFERENCE : 478007 4816510

AUTHORIZATION

COST LIMIT (

ORDER	DATE	:	September	25,	2006

ORDER TIME : 9:37 AM

ORDER NO. : 478007-030

CUSTOMER NO: 4816510

FOREIGN FILINGS

NAME: BREA SARASOTA LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER:



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

	Brea sar	ASOTA LLC	
	(Name of Foreign Limited Li		
Delaware	2	applied for	
Jurisdiction under the law of w	hich foreign limited liability	(PEI mur	nber, if applicable)
* ' - '		Status at 1	
September 25, 2006 (Date of Organiz	stion) 5.	Perpetual (Duradon: You limite	d liability company will cease to
	•	casat or "perpetual")	and the second section of the second sec
upon filing			
(Date (Sep sec	first transacted business in Flor zione 608.501 & 608.502 F.S. t	rida, if prior to registration to determine penalty liabl	ily)
3131 Elliott Avenus, Suit	e 500. Sentile, WA 98121	1	
	Strapt Artifice	(Principal Office)	
	• -	« v resumbot extracts	
If limited liability compar	y is a managor-managad c	ompany, check here	
• -			
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Typed or printed name of signee

By Kaby Kang, VP Operations

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.

	of the Limited Liability (Company is:	<u> </u>
2. The name	and the Florida street add	dress of the registered agent and office are:	
	Corporation Service Com	npany	
		(Name)	
	1201 Hays Street		<u></u> -
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	
		City/State/Zip	
liability compe agent and agre relating to the obligations of	any at the place designate vee to act in this capacity. Proper and complete perj	t and to accept service of process for the above ed in this certificate, I hereby accept the appoint I further agree to comply with the provisions of formance of my duties, and I am familiar with a lagent as provided for in Chapter WallElarida as its agent	tment as registered of all statutes and accept the

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BREA SARASOTA 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 TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2006.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BREA SARASOTALLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2006.

4224965 8300

060881910

Darriet Smith Henden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5069834

DATE: 09-26-06