# -M12000004581

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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SECRETARY OF STATE

LLAHASSEE FIAIE

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ON SERVICE COMPANY.					
	ACCOUNT NO.	:	12000000	0195	
	REFERENCE	:	312428	7435585	
	AUTHORIZATION	:		Smell of a	ran
	COST LIMIT	:	\$ 125		
ORDER DATE : AL					<b></b>
ORDER TIME : 2	:11 PM				
ORDER NO. : 31	2428-005				
CUSTOMER NO:	7435585				
NAME :	FOREIGN FI				
XXXX QUALIFICAT	ION (TYPE: <u>LI</u>	(ي			
PLEASE RETURN TH	E FOLLOWING AS	PRO	OF OF FI	LING:	
CERTIFIE XX PLAIN ST CERTIFIC		NDI	NG		
CONTACT PERSON:	Harry B. Davis		EXT# 29	26	
		E	XAMINER:		

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO 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:
1. ID CENTER (FL) LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. DELAWARE  (Jurisdiction under the law of which foreign limited liability  (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)
4. June 14, 2012 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Will transact after qualification
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7 50 Rockefeller Plaza, 2nd Floor, New York, New York 10020
T. So Received Finally, 2 and Findly, 7 con Findly 10 con
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
CPA: 17 Limited Partnership 50 Rockefeller Plaza, 2nd Floor, New York, New York 10020
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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Investments
mi m
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Nellie Yan, 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 Liabilit	y Company is:
ID CENTER (FL) LLC	
If unavailable, the alternate to be us	ed in the state of Florida is:
2. The name and the Florida street a	address of the registered agent and office are:
Corporation Service	Company
	(Name)
1201 Hays Street	
Florida S	Street Address (P.O. Box NOT ACCEPTABLE)
Tallahassee	FL 32301 25 00
	City/State/Zip
liability company at the place designed agent and agree to act in this capacity relating to the proper and complete p	ent and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as registered by. I further agree to comply with the provisions of all statutes serformance of my duties, and I am familiar with and accept the ed agent as provided for in Chapter 608, Florida Statutes.  (Signature)
	Harry B. Davis 100.00 Filing Fee for Application  Harry B. Davis Asst. Vice President
\$ \$	25.00 Designation of Registered Agent 30.00 Certified Copy (optional)
\$	5.00 Certificate of Status (optional)

## Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ID CENTER (FL) 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 FOURTEENTH DAY OF AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ID CENTER (FL) LLC" WAS FORMED ON THE FOURTEENTH DAY OF JUNE, A.D. 2012.

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

5170043 8300

120934484

AUTHENTYCATION: 9779074

DATE: 08-14-12

You may verify this certificate online at corp.delaware.gov/authver.shtml