

ACCOUNT NO. : 072100000032

REFERENCE : 567413

4300043

AUTHORIZATION

COST LIMIT

ORDER DATE: October 16, 1997

ORDER TIME : 11:18 AM

ORDER NO. : 567413-030

CUSTOMER NO:

4300043

CUSTOMER: Mr. Andrew S. Borrok

Proskauer Rose Llp

1585 Broadway

New York, NY 10036-8299

FOREIGN FILINGS

NAME: SANZAR MANAGER LLC

100002325611--7

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY _ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jon A Bowling



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 21, 1997

JON BOWLING CSC NETWORKS TALLAHASSEE, FL

SUBJECT: SANZAR MANAGER LLC

Ref. Number: W97000023954

We have received your document for SANZAR MANAGER LLC and the authorization to debit your account in the amount of \$285.00. However, the document has not been filed and is being returned for the following:

Please list the NAMES and ADDRESSES of the company's MANAGING MEMBERS or MANAGERS in Item 8. Please be sure to list beside each name whether the entity or individual is a MANAGER or a MANAGING MEMBER.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist Letter Number: 197A00051315

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:

		Sanzar Manager LLC		·			
	"L.	(Name of foreign limited liability company must end w C." if not so contained in the name at present. Please n	ith th	e words "limited company" or their at 'L.L.C." is not an acceptable suffix in	obreviation Florida.)		
	2	Connecticut	α,	Applied For			
		(Jurisdiction under the law of which foreign limited lie company is organized)	bility	(FEI number, if applicab	le)		
	4.	October 8, 1997	5.	January 31, 2090			
		(Date of Organization)	_	(Duration: Year limited liability c cease to exist or "perpetual")	ompany will		
	6.	October 8, 1997					
		(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)					
	7.	c/o Newkirk Management Co., L.	Ρ.	500 West Putnam Aver	nue		
		Greenwich, Connecticut 06830					
		(Street address	s of p	incipal office)			
4GR14		NAME & ADDRESS: TITLE: SANZAR CORP.		NAME & ADDRESS:	TITLE:		
4GR14		SANZAR CORP.		NAME & ADDRESS:	IIILE:		
		c <u>/o Newkirk management c</u> o., <u>l. p.</u> 500 West putnam avenue					
		GREENWICH CONNECTICUT 06830					
(CD) (JAY ZISES					
<u>IGRM</u>		c/o NEJKIRK MANAGEMENT CO., L. P. 500 MEST PUTNAM AVENUE					
		GREENVICE, CONNECTICUT 06830			- ·		
							
					_		
							

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN

The undersigned member or authorized representative of a member of Sanzar Manager LI	ŗC
deposes and says:	
1) the above named limited liability company has at least two members	
2) the total amount of cash contributed by the member(s) is \$ 1000 .	
3) if any, the agreed value of property other than cash contributed by member(s) is \$ A description of the property is attached and made a part hereto.	
4) the total amount of cash or property anticipated to be contributed by member(s) is \$ 3,655 . This total includes amounts from 2 and 3 above.	

By: Sanzar corp, a member

By:

Signature of a member or authorized representative of a

Sanzar Manager LLC

Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the	limited liability company is: Sanzar Manager LLC	SECRETION OF PORT OF PROPERTY
2. The name and a	ddress of the registered agent and office is: Corporation Service Company	21 AM IO: 20
	(Name)	
	1201 Hays Street	
	(P.O. Box not acceptable)	
	Tallahassee, Florida 32301	
,	(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 as registered agent.

Corporation Service Company

By: Vicki Schreiber asst. V.P

(Date)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that

SANZAR MANAGER LLC

organized under the laws of Connecticut as a Limited Liability Company, was filed in this office on October 8, 1997 and is in existence as of the date of this certificate.

Secretary of the State

Date Issued: October 17, 1997