CORPORATE ACCESS,

INC.

00001470

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

CERTIFIED COPY	<u> </u>	Zens 🖯	<u>S</u>
РНОТО СОРУ		/ 	LLC, For.
1.) (CORPORATE NAME & DOCUMENT #)	Suites LLC		
2.)(CORPORATE NAME & DOCUMENT #)	·		1000029898615 -09/17/9901054022 ****346.25 ****346.25
3.) (CORPORATE NAME & DOCUMENT #)			SECRE DIVISION 99 SEP
	Name MJH . Availability	7	FILED PARY OF SIDE CORPOR.
4.) (CORPORATE NAME & DOCUMENT #) 5.)	Document Examiner Updater		ATIONS 05
(CORPORATE NAME & DOCUMENT #)	Updater Verifyer Acknowledgement		
SPECIAL INSTRUCTIONS	W. P. Verifyer		99 SEP /
			FICE III
			3

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:

(Name of foreign limited liability company so contained in the name at present.)	must end with the wor	ds "limited company" or their abbrevia	tion "L.C." if not
2. (Jurisdiction under the law of which foreign company is organized)	3	(FEI number, if applicab	le)
4. July 29, 1999 (Date of Organization)	5	(Duration: Year limited liability compexist or "perpetual")	pany will cease to
6. September (Date first transacted busin	ness in Florida. (See se	3 9 ctions 608.501, 608.502, and 817.155,	F.S.)
7. 160 Sanson	ue St.	, 11 the Floor	· · · · · · · · · · · · · · · · · · ·
		principal office)	
8. List name, title, and business addres will manage the foreign limited liab	ss of each managing ility company in Fl	g member[MGRM] or manager[orida: (attach additional page if	MGR]who necessary)
NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
Tiburou Capital LL	C MGR	NAME & ADDRESS:	TITLE:
Tiburou Capital LL	C MGR	NAME & ADDRESS:	e version de la company de la
- /	C MGR	NAME & ADDRESS:	TITLE: BIVISION SECRE
Tiburou Capital LL	C MGR	NAME & ADDRESS:	e v la la l
Tiburou Capital LL	C MGR	NAME & ADDRESS:	e v la la l
Tiburou Capital LL	C MGR	NAME & ADDRESS:	e v la la l
Tiburou Capital LL	C MGR	NAME & ADDRESS:	e v la la l
Tiburou Capital LL	C MGR	NAME & ADDRESS:	e v la la l
Tiburou Capital LL	C MGR	NAME & ADDRESS:	SECRETARY OF STATE BIVISION OF CORPORATIONS 99 SEP 17 PM 2: 05
Tiburou Capital LL	C MGR	NAME & ADDRESS:	SECRETARY OF STATE BIVISION OF CORPORATIONS 99 SEP 17 PM 2: 05

language, a translation of the certificate under oath of the translator must be submitted.)

State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TIBURON SUITES 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 EIGHTH DAY OF SEPTEMBER, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TIBURON SUITES LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JULY, A.D.

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

Edward J. Freel, Secretary of State

3076659 8300

AUTHENTICATION:

9958369

991373490

DATE:

09-08-99

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:		
Tiburon Suites LLC		
2. The name and the Florida street address of the registered agent and office are:	, -	
PARACORP INCORPORATED (Name)		
236 East 6th Avenue Florida street address (P.O. Box NOT ACCEPTABLE)		. 5
Tallahassee, FL 32303 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.

Denise Jolher
(Signature)
Assistant Secretary

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of	ον
Suites LLC certifies:	
1) the above named limited liability company has at least one member;	, <u>4 </u>
2) the total amount of cash contributed by the member(s) is	\$ <u>10,000</u> ;
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.) and	\$
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$ <i>P</i> 000
Col Z Sign	
Signature of a member or an authorized representative of a mem (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.)	ber.
John F. Dixon, Member Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit