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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)205-0383

From: Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800)494-3124  
Fax Number : (305)675-2811

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FLORIDA/FOREIGN LP/LLP

Punk, Ziegel & Company, L.P.

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J. BRYAN JUN 9 2006

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**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA**

1. Punk, Ziegel & Company, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.)

2. DELAWARE

(State or Country of Formation)

3. 5/2/1990

(Date of Formation)

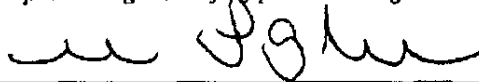
4. A1A REGISTERED AGENT INC.

(Name of Registered Agent for Service of Process)

5. 92 SADBERRY RD. QUINCY, FL 32351

(Florida street address for Registered Agent)

6. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Signature of Registered Agent

7. 520 Madison Avenue - 4th Floor New York, NY 10022

(Principal office address)

8. If limited partnership is a limited liability limited partnership, check box

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9. 520 Madison Avenue - 4th Floor New York, NY 10022  
(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

PZK INC. # F06000003997520 Madison Avenue - 4th Floor  
(Name) (Street Address)  
New York, NY 10022  
(Mailing Address)

\_\_\_\_\_  
(Name) (Street Address)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(Name) (Street Address)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(Name) (Street Address)

\_\_\_\_\_  
(Mailing Address)

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_____	_____
(Name)	(Street Address)
_____	_____
_____	(Mailing Address)
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(Name)	(Street Address)
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11. Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 31st day of MAY, 20 06

Signature of a general partner:  
William J. [Signature]

Fees:

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# Delaware

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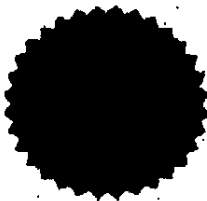
*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PUNK, ZIEGEL & COMPANY, L.P." 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 THIRTIETH DAY OF MARCH, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PUNK, ZIEGEL & COMPANY, L.P." WAS FORMED ON THE SECOND DAY OF MAY, A.D. 1990.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4633367

DATE: 03-30-06

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