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SECRETARY OF STATE TALL AHASSEE FLOODS

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: OKEECHOBEE #1, LLC				
	ed Liability Company)			
11, 2	ility Company for Authorization to Transact Business in emitted to register the above referenced foreign limited			
Please return all correspondence concerning this ma	tter to the following:			
CLAIRE A. DUMAS, ESQ.				
(Nan	ne of Person)			
JONES FOSTER JOHNSTO	ON & STUBBS P.A.			
(Firn	n/Company)			
505 SOUTH FLAGLER I				
(Address)			
WEST PALM BEACH, F	L 33401			
(City/State and Zip Code)				
For further information concerning this matter, plea	se call:			
CLAIRE A. DUMAS, ESQ.	at (561) 659-3000			
(Name of Person)	(Area Code & Daytime Telephone Number)			
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\Bigsiz\$ \$\\$125.00\$ Filing Fee \$\Bigsiz\$ Certificate of \$\\$5\$	☑\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy			

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: Okeechobee #1, LLC. (Name of Foreign Limited Liability Company) State of Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) company is organized) November /6, 2006 (Date of Organization) Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 5601 Corporate Way, Ste. 404, West Palm Beach, FL 33407 (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: Brian Waxman, 5601 Corporate Way, Ste. 404, West Palm Beach, FL 33407 Peter Applefield, 5601 Corporate Way, Ste. 404, West Palm Beach, FL 33407 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 oath of the translator must be submitted.) Holding company. 11. Nature of business or purposes to be conducted or promoted in Florida: 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.)

Typed or printed name of signee

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.

	the Limited Liability Company is:		
2. The name an	d the Florida street address of the registered agent and office are:		
	Brian Waxman		
	(Name)		
	5601 Corporate Way, Ste. 404, West Palm Beach, FL 334	SECIAL SE	
	Florida Street Address (P.O. Box NOT ACCEPTABLE))6 NOV 28 SECKÉTAKT M SAHASSE	
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	City/State/Zip	AHII: 2 AHII: 2 FLORII	_
liability company agent and agree relating to the pr	ned as registered agent and to accept service of process for the above stated lime of at the place designated in this certificate, I hereby accept the appointment as reto act in this capacity. I further agree to comply with the provisions of all statute oper and complete performance of my duties, and I am familiar with and accept position as registered agent as provided for in Chapter 608, Florida Statutes. (Signature)	Alled registered tes	

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

Delaware

PAGE 1

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OKEECHOBEE #1, 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-FIRST DAY OF NOVEMBER, A.D. 2006.



arriet Smith Window Socreton of State

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5217236

DATE: 11-21-06

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