

REFERENCE

780291

4320503

AUTHORIZATION

COST LIMIT

ORDER DATE : July 28, 2000

ORDER TIME : 11:03 AM

ORDER NO. : 780291-005

CUSTOMER NO: 4320503

CUSTOMER: Kay Torpey, Legal Assistant

The Trump Group

Four Stage Coach Run P.o. Box 186

East Brunswick, NJ 08816

FOREIGN FILINGS

NAME:

WIA INC.

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

000003340100--1



FLORIDA DEPARTMENT OF STATE

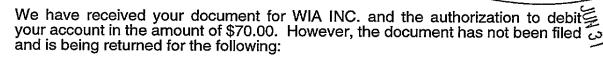
Katherine Harris Secretary of State

July 31, 2000

TAMARA ODOM CSC TALLAHASSEE, FL

SUBJECT: WIA INC.

Ref. Number: W00000019000



The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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: 600A00041475

00 FUE -3 AM II: 30

BECEINED

10 JU 3

RESOLUTION OF BOARD OF DIRECTOR

(Please print or type)

| | | 8 |
|---|---------------------------------------|--|
| I, the undersigned James M. Lieb | | , do hereby certify |
| t, the upact signed cames_m. bleb | (Name). | |
| | | 7 |
| that this Resolution of the Board of Directo | ors of WIA, Inc. | 15 F |
| | | .38 |
| | (Corporate Name) | |
| a corporation duly organized and existing u | · | |
| was duly adopted or. | Aug | ust 1 , KX 2000. |
| Ee it resolved, that WIA, Inc. | (Corporate Name) | AND THE RESERVE OF THE PARTY OF |
| organized and existing in the State ofDe | ·laware, h | ereby adopts the name |
| | WIA of AVENTURA, INC. | for use in Florida. |
| Dated: August 1, 2000 Signature of either Cl | hairman, Vice Chairman or any officer | OD JUL 31 AM 10: 38 |

INH 319(4/96)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. <u>WIA, INC.</u> (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORAT abbreviations of like import in language as will clearly indicate that it is a corporation instead or partnership if not so contained in the name at present. | ION™ or words or of a natural person |
|--|---|
| 2. Delaware (State or country under the law of which it is incorporated) (FEI number if applicable) | • |
| i applicable) | |
| 4. Dec. 11, 1996 5. Perpetual | |
| 4. Dec. 11, 1996 5. Perpetual (Date of Incorporation) 6. Upon Qualification (Duration: Year corp. will cease to exist or | P |
| 6. Upon Qualification | perpetual") |
| Upon Qualification (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F | 9 55 |
| | .S. L |
| 7. C/o TG Management, LP | ₩ (122) |
| | |
| 4000 Island Blvd., Aventura, FL 33160 | 125 |
| (Current mailing address) | |
| 8. any lawful activity | |
| | _ 38 52 |
| (Purpose(s) of corporation authorized in home state or country to be carried out in the state or | (3) |
| state of country to be carried out in the state of | Florida) |
| 9. Name and street address of Florida registered agent: | |
| Name: Corporation Service Company | 8 🥌 |
| Office Address: 1201 Hays: Street | |
| | <u> </u> |
| Tallahassee Florida 22201 | |
| 7. Torida, 32301 | |
| (Zip C | ode) G |
| 10. Registered agent's acceptance: | 3 4 |
| Having been named as registered | 3 <u>*</u> |
| Having been named as registered agent and to accept service of process for the corporation at the place designated in this application, I hereby accept the application and agree to act in this capacity. I further agree to accept the application. | above stated |
| registered agent and agree to not in the animal armount, I hereby accept the ani | nointment ac |
| of all statutes relative to the proper and complete performance of my duties, and with and accept the obligations of my position as registered agent | ne provisions |
| with and accept the obligations of my position as registered agent. | i am tamiliar |
| | • |
| By: | |
| | |
| (Registered agent's signature) | |
| 11. Attached is a certificate of existence duly authenticated, not more than 90 days delivery of this application to the Department of State, by the Secretary of the Secretary of State, by the Secretary of Stat | |
| delivery of this | e prior to |
| delivery of this application to the Department of State, by the Secretary of State official having custody of corporate records in the initialization. | > hinot fo |
| official having custody of corporate records in the jurisdiction and the state | e or other |

official having custody of corporate records in the jurisdiction under the law of which it is

12. Names and addresses of officers and/or directors:

A. DIRECTORS

| , | Chairman | Eddie Trump | e saile Service Service 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | |
|--|------------------------------------|---|---|--|
| | Address: | 4000 Island Blvd. | - 8 | |
| | | Aventura, FL 33160 | - 6 | |
| | Vice Chair | man: | - 1000 C | |
| | Address: | | | |
| | | | - | |
| | Director: | James M. Lieb | _ | |
| | Address: | c/o TG Management, LP, 4000 Island Blvd. | . | |
| | - | Aventura FL 33160 | | |
| | Director: | | | |
| | Address: _ | | 3 | |
| В | OPETODA - | | 3 | |
| D | 110L10 | | MIO: 38 | |
| | Ex. Vice President: _ | James M. Lieb | 8 | |
| | Address: | c/o TG Management, LP, 4000 Island Blvd. | | |
| | | Aventura FL 33160 | | |
| | SenioVice Presiden | t: _Mark S. Hirsch | ر است. معدد | |
| | Address: | The Chrysler Building, 405 Lexington Ave. | 8 | |
| | | New York NY 10174 | DO JUL 31 | |
| | Secretary: | James M. Lieb | | |
| | Address: | same as above | ORFUR DRFUR | |
| | | | ATTU | |
| | Treasurer: | James M. Lieb | WS. | |
| | Address: | same as above | | |
| 13. | - James Lil | ch an addendum to the application listing additional of | officers and/or | |
| (5) | ignature of Chairman, Vice Chairma | n, or any officer listed in number 12 of the application. | | |
| 14. | James M. Lieb, Execut: | ive Vice President | | |
| (Typed or printed name and capacity of person signing application) | | | | |

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WIA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STAND AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF JULY, A.D.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO_DATE.

AUTHENTICATION:

0587660

001381885

2693525

-8300°

DATE:

07-28-00