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From:

Account Name : CORPORATION SERVICE COMPANY SA

Account Number : 120000000195 Phone : (850)521-1000 Fax Number : (850)558-1575

### FOREIGN PROFIT QUALIFICATION

#### LIVING ROOM PROPERTIES INC.

| Certificate of Status | 0       |
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# JUL. 12. 20041 4:14PMN BYCORPORATION SVC COORATION FOR AUTHORIZNO. 900N TP. 2/5INSACT BUSINESS IN FLORIDA H04000144045 3

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

| l. LIVING ROOM PR        | OPERTIES INC.                         |   |                     |
|--------------------------|---------------------------------------|---|---------------------|
|                          |                                       | D," "COMPANY," "CORPORATION,"                               |                     |
| "Inc.," "Co.," "Corp." " | The," "Co," or "Corp.")               | D," "COMPANY," "CORPORATION,"                               |                     |
| (If name mavailable in   | Florida, enter sitemate corporate nau | ne adopted for the purpose of transacting business in Flo   | activ)              |
| Delaware                 |                                       | 3   | 7, Jo               |
| •                        | the law of which it is incorporated)  | (FEI number, if applicable)                                 | 30/20               |
| July 7, 2004             |                                       | 5. perpetual  | 90                  |
|                          | orporation)                           | (Duration: Year corp. will cease to exist or "perpen        | aal")               |
| . Open qualificat:       | ion                                   |   |                     |
|                          |                                       | not transacted business in Florida, insert "upon qualificat | tion ")             |
| <b></b>                  | (SEE SECTIONS 607.150                 | 01, 607.1502 and 817.155, F.S.)                             |                     |
|                          |                                       | Pariners LLP  |                     |
|                          | (Principal office ad                  |   |                     |
|                          | 505 Park Avenue, New York             | Nove Tracks 1000  |                     |
|                          | Current mailing ad                    |   |                     |
| ·                        |                                       | · <b>,</b>  |                     |
| Annuar — A Trend 1 Adam  | -                                     |   |                     |
| Owner of building        |                                       | country to be carried out in state of Florida)              |                     |
| (e aposta) or our        | Principal and in The State of F       | county to be cultica out at state of Ficeplay               |                     |
| Name and street add      | ress of Florida registered agent:     | (P.O. Box or Mail Drop Box NOT acceptable)                  |                     |
| Name: Corpo:             | ration Service Company                | •   |                     |
|                          |                                       |   |                     |
| ffice Address: 1201      | Havs Street                           |   | _                   |
| Tallal                   | hassee                                | , Florida 32301   |                     |
|                          | (City)                                | (Zip code)  |                     |
| The number of the second |                                       |   |                     |
| ). Registered agent's a  |                                       | ice of process for the above stated corporation at t        | æ                   |
| signated in this applica | ation, I kereby accept the appoint    | nest as registered agent and agree to act in this o         | ne place<br>anority |
| rther agree to comply v  | with the provisions of all statutes : | relative to the proper and complete performance of          | f mv dutie          |
| d I am fomiliar with a   | nd accept the obligations of my po    | ostiton as registered agent.                                | , ,                 |
| Corners                  | ation Service Company                 |   |                     |
| $\wedge$                 | 4.                                    | Debaut m  |                     |
| aucu                     | and Wilkinson                         | Deborah D. Skipper  |                     |
|                          | (Derrictered angelo himselma)         | Asst. V. Fres.  |                     |

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

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

| A. JUL. 12. 201 | 04 <b>s</b> 4:14PM | CORPORAT                               | ION SVC CO                            |  |              |                                       | HO                  | +00NO.9     | 10 P         | 3/5<br><b>3</b>                              |                         |
|-----------------|--------------------|--|---------------------------------------|--|--------------|---------------------------------------|---------------------|-------------|--------------|--|-------------------------|
| Chairman: See   | attached o         | fficers/di                             | rectors I                             | ider                                     |              |                                       |                     |             |              | <del></del>                                  | <del></del>             |
| Address:        |                    |  |                                       |  |              | ·                                     | <del></del>         | -           | ·=           |  | <del></del>             |
| <del>\</del>    |                    |  |                                       |  |              |                                       |                     |             |              | ) <del>*</del>                               |                         |
| Vice Chairman:  |                    |  | · · · · · · · · · · · · · · · · · · · | · .                                      |              | ·                                     |                     |             | <u> </u>     |  |                         |
| Address:        |                    |  |                                       | , .<br>,                                 |              | :                                     |                     | ··          | - 30         | <u>,</u>                                     | , ,                     |
|                 |                    | · · · -                                | रक्षिक एक<br>इंकेट एक                 | 1 to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ٠,٠          | i.                                    | 5 <del>- 19</del> 0 | ·-          | The state of | U.   | <u>Z</u> .              |
| Director:       | **                 |  | <b>*</b> * <b></b>                    |  |              | <u> </u>                              | ·,                  |             | 19/1         | <u>,                                    </u> | <b>~</b> <sup>⟨</sup> ⟨ |
| Address:        |                    |  |                                       | •  |              |                                       | 7 .5. 1.            | -           |              |  | 1/1                     |
|                 |                    |  |                                       | <del>-</del>                             |              |                                       |                     |             | ~            | KAN TO                                       | 7/2/2                   |
| Director:       |                    |  |                                       | ÷  |              |                                       |                     | <br>        | :            | W.   | 18                      |
| Address:        |                    | *                                      | ,                                     |  | ;            |                                       | ·                   | <del></del> |              |  | . 4                     |
| Proceedings.    |                    | 7                                      | Right Company (S.                     | April 1                                  |              | <del></del>                           |                     |             |              | . ,  | <del></del>             |
| B. OFFICER      | s                  |  |                                       |  |              | · · · · · · · · · · · · · · · · · · · | <del></del>         | <del></del> |              |  | ·                       |
| President: See  | attached o         | fficers/di                             | rectors r                             | ider                                     |              |                                       | <del></del>         |             | ·            |  | ~                       |
| Address:        | •                  |  | ٠<br>ټ ت                              | «· 1 ()                                  |              |                                       |                     |             |              |  | ).<br>                  |
|                 | *** ,              | · ·                                    | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |  | :.<br>-3     | ,                                     |                     |             |              |  | <u> </u>                |
| Vice President  |                    |  |                                       |  |              | **                                    |                     |             | · ·          | وتوء   |                         |
|                 |                    |  | , ,                                   | ,  |              |                                       |                     |             | •            |  | : .                     |
|                 |                    | <del>.</del>                           |                                       | Asia<br>Control                          |              | '⊊<br>#: ₩ ₩                          |                     |             |              |  |                         |
| Secretary:      |                    | ,                                      |                                       |  | <del></del>  | نقددني                                |                     | 3.1         |              | <del></del>                                  |                         |
| Address:        |                    | ······································ |                                       |  | :            |                                       | <del></del>         | <u> </u>    |              |  |                         |
|                 |                    |  |                                       | <del></del>                              |              |                                       |                     |             |              |  | •                       |
| Treesurer.      | <del></del>        |  |                                       | <del>-</del>                             | <del>.</del> | <br>                                  | <del></del>         | · · -=-:    |              | ~~~~   |                         |
| Address:        | -/-                | **                                     | 5                                     |  | •            | <u>.</u> 4.                           | <del></del>         | <del></del> | <del></del>  |  | _                       |
| NOTE: If nec    | essery you me      | y attach an ac                         | Edendum to t                          | he applic                                | ation i      | isting (                              | addition            | al officers | and/or di    | recitors.                                    | e 4 .                   |
| 13.             |                    | Disament of the                        | 1000 - 1 11-4- 1                      | Y.,                                      | _ 34         | 613                                   | _1:,:               |             | <del></del>  | <del></del>                                  | <del></del>             |
| <b>.</b>        | (Signature of      |  | micer listed                          | in dumide                                | T 12 0       | i ine aj                              | ррисаци             | XI)         |              |  |                         |
| 14. Ernesto     |                    | esident<br>ed or printed:              | name and car                          | acity of                                 | Derson       | signin                                | ez applie           | cation)     |              | ·  | <del></del>             |

### Directors and Officers of LIVING ROOM PROPERTIES INC.

Emesto Rimoch Eva Saraga de Rimoch Diego Rimoch

JUL. 12. 2004 4:14PM

Director/President Director/Vice-President Director/Secretary

THE LEWIS SECTIONS

# Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIVING ROOM PROPERTIES INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF JULY, A.D. 2004.

AND I DO HERBY FURTHER CERTIFY THAT THE SAID "LIVING ROOM PROPERTIES INC. " WAS INCORPORATED ON THE SEVENTH DAY OF JULY, A.D. 2004.

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





AUTHENTICATION: 3219672

DATE: 07-08-04

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