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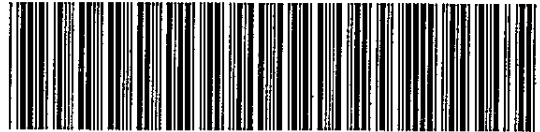
(Business Entity Name)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN SEP 24 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C. David Goldman, P.C.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Rita Groark
(Name of Person)
McDermott, Will & Emery LLP
(Firm/Company)
227 West Monroe Street
(Address)
Chicago, IL 60606-5096
(City/State and Zip code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Rita Groark at (312) 984-6497
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

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.

C. David Goldman, P.C.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Connecticut 3. 06-1048926
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. October 1, 1981 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 50 Rockefeller Plaza, 11th Floor, New York, NY 10020-1605
(Principal office address)
- Same as above
(Current mailing address)

8. Practice of law
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Ira J. Coleman

Office Address: 201 S. Biscayne Blvd., 22nd Floor
Miami, Florida 33131-4336
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.

By: _____

(Registered agent's signature)

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. DIRECTORS

Chairman: C. David Goldman

Address: 50 Rockefeller Plaza, 11th Floor
New York, NY 10020-1605

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: C. David Goldman

Address: 50 Rockefeller Plaza, 11th Floor
New York, NY 10020-1605

B. OFFICERS

President: C. David Goldman

Address: 50 Rockefeller Plaza, 11th Floor
New York, NY 10020-1605

Vice President: _____

Address: _____

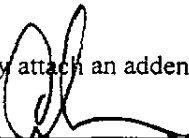
Secretary: C. David Goldman

Address: 50 Rockefeller Plaza, 11th Floor, New York, NY 10020-1605

Treasurer: C. David Goldman

Address: 50 Rockefeller Plaza, 11th Floor, New York, NY 10020-1605

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. C. David Goldman, President
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA
CORPORATIONS

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,
and keeper of the seal thereof, DO HEREBY CERTIFY, that

C. DAVID GOLDMAN, P.C.

incorporated under the laws of Connecticut is in existence.

A handwritten signature in cursive script, reading "Susan Bysiewicz", is written over a horizontal line.

Secretary of the State

Date Issued: September 17, 2004