## Florida Department of State

Division of Corporations Public Access System

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: CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone

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W. P. Verifyer

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## FOREIGN PROFIT QUALIFICATION

TRUMP LAS OLAS MEMBER CORP.

Certificate of Status	0
Certified Copy	1
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## 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.

	OLAS MEMBER CORP.				
	Corporation; must include "INCORPORA" "Corp," "Inc," "Co," or "Corp.")	TED	," "COMPANY," "CORPORATION	<b>","</b>	
(If name unava	allable in Florida, enter alternate corporate r	ıamc	adopted for the purpose of transacting	g business in Florida)	
2. Delaware	_	3.			
(State or countr	y under the law of which it is incorporated)	)	(FEI number, if appl	icable)	
4. June 10, 200	)5	_ 5.	perpetual		
	ne of incorporation)	_	(Duration: Year corp. will cease to	exist or "perpetual")	
6. upon filing					
(Date first trans	sacted business in Florida. If corporation hat (SEE SECTIONS 507.		it transacted business in Florida, insen 1, 607.1502 and 817.155, F.S.)	"upon qualification.")	
7. c/o Mar-A-La	go Club				
	(Principal office	o add	iress)		
1100 S. Ocea	n Blyd., Palm Beach, FL 33480				
	(Current mailing	g add	iress)		
	managing member of Trump Las Olas L (s) of corporation authorized in home state		number to be assisted out in stan of Fig.		
(Embosi	e(s) or corporation authorized in nome state	OF GO	oning to be carried out in state of 140	noaj	
9. Name and <u>st</u>	<u>reet address</u> of Florida registered age	ent:	(P.O. Box or Mail Drop Box NO)	[acceptable)	
Name:	NRAI Services, Inc.		<u> </u>	e	
O	2721 Expertive Park Drive Suite A			Per es	
Office Address:	2731 Executive Park Drive, Suite 4		<del></del>	PR (	
	Weston		, Florida <u>33331</u>	野豆	
	(City)		(Zip code)	SS	1
	agent's acceptance:			E O	
designated in th further agree to	med as registered agent and to accept s is application, I hereby accept the appo comply with the provisions of all statu ar with and accept the obligations of m	oinin tes r	nent as registered agent and agre clative to the proper and complete	e to actififials capacity	
	NRAI Services, Inc.				
	By: Aflia Saliente	6			
•	(Registered agent's signal	ture)			

- 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:

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A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman;	
Address:	
Director: Donald J. Trump	
Address: 725 Fifth Avenue	
N., M. J. 104 40400	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	
Vice President: Bemard Diamond	SEC ALLI
Address: 725 Fifth Avenue	<b>PR E</b>
New York, NY 10022	AR -
Secretary:	Eel
Address:	
Treasurer:	202
Address:	
OTE: If never sary, you may attach an addendum to the application lists	A
(Signature of Director or Officer listed in number !2 of the	application)
14. Bernard Diamond, Vice-President  (Typed or printed name and capacity of pe	

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRUMP LAS OLAS MEMBER CORP." 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 THIRTEENTH DAY OF JUNE, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRUMP LAS OLAS MEMBER CORP." WAS INCORPORATED ON THE TENTH DAY OF JUNE, A.D. 2005.

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

FILED

1005 JUN 13 A 9 02

SECRETARY OF STATE



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Warriet Smith Mindson Harries Smith Windson

AUTHENTICATION: 3943904

DATE: 06-13-05

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