ACCOUNT NO. 072100000032

REFERENCE

844136

4307884

AUTHORIZATION

\$ 70.00 COST LIMIT

ORDER DATE: June 4, 1998

ORDER TIME : 12:53 PM

ORDER NO. : 844136-025

CUSTOMER NO: 4307884

CUSTOMER: Walter F. X. Healy, Esq

Windels, Marx, Davies & Ives

156 West 56th Street

20000254797

New York, NY 10019

#### FOREIGN FILINGS

NAME: PAMI-FL5 INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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:

1	PAMI-FL5 Inc.
	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2	3. Applied for
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4	. May 29, 1998 5. Perpetual
	(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	Upon registration
	(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7.	c/o Lehman Brothers Inc.
	3 World Financial Center, 12th Floor, New York, NY 10285
	(Current mailing address)
8.	All lawful activity
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
Э.	Name and street address of Florida registered agent:
	Name: Corporation Service Company
	Office Address: 1201 Hays Street
_	Tallahassee , Florida, 32301 (Zip Code)
	Designation of the control of the co

#### 10. Registered agent 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.

, ,
CORPORATION SERVICE COMPANY
Ext. Dales B. Ras
(Registered agent's signature) (Officer)
Karen B. Rozar, As Its Agent
(Type Name and Title of Officer)

Nam	es and addresses of officers a	nd/or directors:	•		
IREC	TORSSEE ATTACHED	SCHEDULE			
	Chairman:	·			
	Address:				
	Vice Chairman:			•	
	Address:				
	Director:				
	Address:			, (	o
	<b>,</b>	,		SECT	а 
	Director:			記	1
	Address:			EF 9	PM 3: 08
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. •	President:			· .	
	Address:	• .			
				**	
	Vice President:				ı
	Address:				
	;	·			
	Secretary:				
	Address:				•

11.- Attached is a certificate of existence duly authenticated, not more than 90 days prior to

•	Treasurer:			<del></del>		· •			
,	Address:	·		•	•				<del></del>
		·		·	<u> </u>				<b></b> ,
NOTE: and/or d	of necessary, you represent the second of th	nay at	tach an a	addendum	to the ap	plication	listing ad	ditional	officers
(Sign:	ature of Chairman, Vi	ce Cha	irman, or a	any difficer	listed in nu	mber 12 o	f the appl	ication)	
	Walter F.X. He								
(Ivpe	d or printed name an	d canad	rity of nare	enn eianina	application	1			

98 JUNI-4 PH 3: 08
SECRETARY OF STATE
SECRETARY OF STATE

#### **Directors**

Yon K. Cho Edward J. Meylor

### Officers (Partial List)

Yon K. Cho Edward J. Meylor Dean Marsan Walter F. X. Healy Jennifer Marre Eileen Bannon President and Treasurer Vice President Vice President Vice President Secretary Assistant Scretary



## State of Delaware

#### PAGE 1

# Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PAMI-FL5 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 SECOND DAY OF JUNE, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PAMI-FLS INC." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF MAY, A.D.

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

IRAI



Edward J. Freel, Secretary of State

AUTHENTICATION:

9115378

DATE:

06-02-98

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