2003 LIMITED LIABILITY COMPANY

FILED Feb 20, 2003 8:00 am Secretary of State 01-22-2003 90105 029 ****50 00

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SIGNATURE Speaked by Brief and or preted name of inglamed aport on the 7 applicable. (NOTE Replaced Agent application required when relevations) Charge Mark File NOW! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS / MANAGERS 10.						1 131	The state of the state of		- m	1
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Attachment # LOIDE

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE HOLTSVILLE NY 00501

DATE OF THIS NOTICE: 05-09-2002 NUMBER OF THIS NOTICE: CP 575 EMPLOYER IDENTIFICATION NUMBER: 04-3654377

FORM: SS-4 0133445150 0

FOR ASSISTANCE CALL US AT: 1-800-829-1040

THREE PALMS HOLDINGS LLC PORTUONDO MANUEL J SOLE MEMBER 1825 PONCE DE LEON BLVD STE 235 CORAL GABLES FL 33134

OR WRITE TO THE ADDRESS SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN-04-3654377. This EIN will identify your business-account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing and incorrect information in your account. It also could cause you to be assigned more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization; is available at most IRS offices and has details on how you can apply .

Keep this part for your records.

CP 575 E (Rev. 1-2001)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 E

0133445150

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 05-09-2002 EMPLOYER IDENTIFICATION NUMBER: 04-3654377 FORM: SS-4

INTERNAL REVENUE SERVICE HOLTSVILLE NY 00501

THREE PALMS HOLDINGS LLC PORTUGNDO MANUEL J SOLE MEMBER 1825 PONCE DE LEON BLVD STE 235