

REFERENCE : \_704910

5032643

AUTHORIZATION .

COST LIMIT :

\$ 125.00

ORDER DATE: May 22, 2000

ORDER TIME : 9:28 AM

ORDER NO. : 704910-005

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CUSTOMER NO: 5032643

CUSTOMER: Ms. Eileen M. Bannon Lehman Brothers, Inc.

101 Hudson Street

Jersey City, NJ 07302

FOREIGN FILINGS

NAME:

LB TOWN CENTER I RESIDENTIAL

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

EILEEN M. BANNON

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	LB TOWN CENTER I RESIDENTIAL LLC	n limited liability company)	<u> </u>
	(14tille of foreign	n (numen usomy company)	
2.	DELAWARE	3 PENDING	
	(Jurisdiction under the law of which foreign limited liability	(FEI number, if application	ible)
	sompany is digmazed)		,
Į.	MAY 17, 2000	5. PERPETUAL	
	(Date of Organization)	(Duration: Year limited liability core	manu will cease to
		exist or "perpetual")	ipanj mili como m
	UPON FILING		
	(Date first transacted business in Florida, (S	ee sections 608.501, 608.502, and 817.155	FSI
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•	3 WORLD FINANCIAL CENTER		
	NEW YARK MEN MORE 4000		
	NEW YORK, NEW YORK 10285	ss of principal office)	
	Contest addre	as or principal office)	٦. 0
	If limited liability company is a manager-manage	d company shoots have	OO MAY
	y	d company, check here	
	The name and usual business addresses of the ma		follows: 23
	de la composition della compos	maging members or managers are as	follows: $\omega$
	PAMI LLC		follows: Y 23 MI
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	C/O 3 WORLD FINANCIAL CENTER		حرير وتيت
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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

tered agent and office are:
7
SSE
NOT ACCEPTABLE)
, 32301–2607 e/Zip
,

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Vicki Schreder, ast. V.P.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## State of Delaware Office of the Secretary of State

PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LB\_TOWN CENTER I RESIDENTIAL LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF MAY, A.D. 2000.

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

DATE:

AUTHENTICATION:

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05-22-00

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