00000001236 CORPORATION

ACCOUNT NO. : 07210000032

REFERENCE :

736133 4306525

AUTHORIZATION :

COST LIMIT :

ORDER DATE: June 19, 2000

ORDER TIME : 4:23 PM

700003302187--7

ORDER NO. : 736133-005

CUSTOMER NO: 4306525

CUSTOMER: Ms. Alissa Epstein

Sills Cummis Radin Tischman

One Riverfront Plaza

Newark, NJ 07102

W-16089

FOREIGN FILINGS

NAME: LILLIAN ROSS FAMILY LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 23, 2000

CSC

ATTN: DARLENE WARD

SUBJECT: LILLIAN ROSS FAMILY LLC

Ref. Number: W00000016089



We have received your document for LILLIAN ROSS FAMILY LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

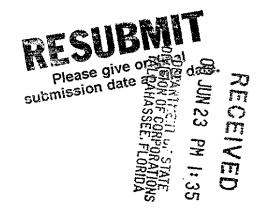
The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 000A00035708



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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Lillian Ross Family LLC (Name of foreign limited liability company) 22-3727473 (Jurisdiction under the law of which foreign limited liability company is organized) 4-13-2000 5. Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") Upon Qualification (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 7. c/o Elaine S. Cohen, Manager 633 Alacci Way, River Vale, NJ 07675 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here X 9. The name and usual business addresses of the managing members or managers are as follow Alan M. Ross 15 17th Street 633 Alacci Way Norwood, NJ 07648 River Vale, NJ 07675 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Investments Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Elaine S. Cohen

Typed or printed name of signee

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.

1. The name of the Limited Liability Company is:
Lillian Ross Family LLC
2. The name and the Florida street address of the registered agent and office are:
Corporation Service Company (Name)
Florida street address (P.O. Box NOT ACCEPTABLE)
Tallahassee FL 32301 City/State/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..

BRIAN COURTNEY, 1
(Signature)

(Signature)

\$ 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

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LILLIAN ROSS FAMILY 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 NINETEENTH DAY OF JUNE, A.D. 2000.

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

FILED

OD JUN 23 AM 8: 52

SECRETARY OF STATE



Edward J. Freel, Secretary of State

AUTHENTICATION:

0505856

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DATE:

06-19-00

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