

Feb-27-2002

Greenberg Traurig

001/004

MO2000000532

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H02000045892 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : GREENBERG TRAURIG (WEST PALM BEACH)
Account Number : 075201001473
Phone : (561) 650-7900
Fax Number : (561) 655-6222

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 27

RECEIVED

02 FEB 27 PM 3:01

DIVISION OF CORPORATION

FOREIGN LIMITED LIABILITY COMPANY


CSC PINECREST GP, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

**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:

1. CSC PINECREST GP, L.L.C.
(Name of foreign limited liability company)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 65-1060825
(FBI number, if applicable)
4. December 8, 2000
(Date of Organization)
5. "perpetual"
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.153, F.S.))
7. 250 Australian Avenue South, Suite 1003
West Palm Beach, FL 33401
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☐
9. The usual business address of the managing members or managers are as follows:
250 Australian Avenue South, Suite 1003
West Palm Beach, FL 33401
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: to engage in any act or activity for which limited liability companies may be organized under the Florida Limited Liability Company Act.


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.)

Adam Schlesinger
Typed or printed name of signer

HQ2000045892 5

H02000045892 5

**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:

CSC PINECREST GP, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

Adam Schlesinger
(Name)

250 Australian Avenue South, Suite 1003

Florida street address (P.O. Box NOT ACCEPTABLE)

West Palm Beach, FL 33401
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.



Adam Schlesinger

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

H02000045892 5

V:\po-ny\01071625\0102821-010000

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 FEB 27

Delaware

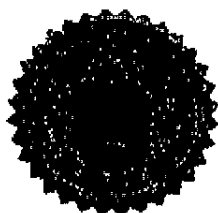
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CSC PINECREST GP, L.L.C." 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-SIXTH DAY OF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 FEB 27



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3327523 8300

020127831

AUTHENTICATION: 1633078

DATE: 02-26-02