# The Moderation of the Second State of the Seco

ACCOUNT NO. : 072100000032	AA SE
REFERENCE : 568953 4305038	F 02 MAY SECKET
AUTHORIZATION: Patricia Price	<b>1</b> \$\$₹ 5 =
COST LIMIT : \$ 130.00	PA PA PA F, FL
ORDER DATE: May 7, 2002	3: 53 STATE LORIDA
ORDER TIME : 10:05 AM	
ORDER NO. : 568953-015	
CUSTOMER NO: 4305038 20000	55005027
CUSTOMER: Mary Ann Kramer, Legal Asst Kirkpatrick & Lockhart Llp 75 State Street	
Boston, MA 02109	
FOREIGN FILINGS	AL
NAME: SPA CAPITAL, LLC	to constitute the second
XXXX QUALIFICATION (TYPE: <u>LL</u> )	RECEIVE 02 NAY -9 ANI BIVISION OF CATAGO
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY  XX PLAIN STAMPED COPY  XX CERTIFICATE OF GOOD STANDING	11: 29 61/41/01
CONTACT PERSON: Deborah Schroder EXT# 1118	
EXAMINER:	
	1

### 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:

l.	Spa Capital, LLC
	(Name of foreign limited liability company)
	Delaware 3, 52-2331282
(	Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
ŀ.	August 10, 2001 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
	opon quartiteacton
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
	195 Church Street, New Haven, Connecticut 06510
	TEOR
	(Street address of principal office)
•	If limited liability company is a manager-managed company, check here
	The name and usual business addresses of the managing members or managers are as follows:
	David Moross, 195 Church Street, New Haven, Connecticut 06510
	Francis X. Acunzo, 195 Church Street, New Haven, Connecticut 06510
	Charles Lelon, 195 Church Street, New Haven, Connecticut 06510
0.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record
	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.)
1	. Nature of business or purposes to be conducted or promoted in Florida: To operate day and
	overnight spas
	XXX
	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.)
	Francis X. Acunzo
	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.

Spa Capital, LLC	- Er	02	
2. The name and the Florida street address of the registered agent and office are:	UKETAN LAHASS	MAY -9	7
Corporation Service Company	m <sup>-</sup>		L
(Name)	)F STA FLOR	PM 3: 5	
1201 Hays Street	크	53	
Florida street address (P.O. Box NOT ACCEPTABLE)	,5>		
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.

Dusan a Vertrees

1. The name of the Limited Liability Company is:

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

PAGE 1

# Delaware

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SPA CAPITAL, 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 THIRD DAY OF MAY, A.D. 2002.

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

FILED

02 MAY -9 PM 3: 53

SECRETARY OF STATE
AND ANASSEF, FLORIDA



Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1759312

DATE: 05-03-02

3412660 8300

020285325