TRO200001207

CORPORATION(S) NAME		
HVI (2), LLC		FILED OZMAY -9 A) 9: 13 SECRETAGE OF STATE TALLAMASSEE, FLOPIDA
() Profit () Nonprofit () Foreign	() Amendment () Dissolution/Withdrawal	() Merger () Mark
() Limited Partnership () LLC () Certified Copy	() Reinstatement () Annual Report () Name Registration () Fictitious Name () Photocopies	() Merger () Mark () Other () Change of RA () UCC () CUS
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Name Availability Document Examiner Updater Verifier W.P. Verifier	5/9/02	Order#: 5325585 800055003288 -05/03/0201081020 Ref#: Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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. HVI (2), ILC						
(Name of foreign limited liability company)						
a polavne 3 N-A						
2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)						
(Jurisdiction under the law of which foreign limited liability (FEI limited, it approaches)						
4. February 5, 1999 Outs of Organization) 5. Perpetual (Duration: Year limited liability company will cease to	1					
(Date of Organization) (Duration: Year limited liability company wite cease to exist or "perpetual")	:					
m_, m	1					
6. Upon qualification) 					
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)						
THE DOUBLE PROPERTY NAME AND 10154						
7. 345 Park Avenue, New York, NY 10154						
(Street address of principal office)						
and the same of th						
8. If limited liability company is a manager-managed company, check here						
and the second s						
9. The usual business addresses of the managing members or managers are as follows:						
345 Park Avenue, New York, NY 10154						
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record	rds 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						
me junisticion uniterine lew of which it is organized. (A phototopy is the acceptable, it the certain and selection and acceptable is the certain and acceptable in the certain acce						
translation of the certificate under oath of the translator must be submitted.)						
and the second of the second o						
11. Nature of business or purposes to be conducted or promoted in Florida:						
to own and operate real estate						
1 1						
youth or						
Signature of a member or an authorized representative of a member.						
(In accordance) Lith section 608.408(3), F.S., the execution of this document constitutes						
an affirmation under the penalties of perjusy that the facts stated herein are true.)						
Jonathan D. Gray						
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 Liabil	ity Company is:	
	HVI (2)	, LLC	
2. The	name and the Florida street	address of the registered agent and office ar	e:
			OZ MAY SECRETALLAH
	C T Corporation Syste	m	
		(Name)	FILE
c/o C T Corporation System, 1200 South Pine Island Road			
		street address (P.O. Box NOT ACCEPTABLE)	9: 13 STATE FLORIDA
	Plantation	FL 33324	
		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..

(Signature)

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

Corporation System

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HVI (2), 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 SEVENTE DAY OF MAY, A.D. 2002.

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

3002281 8300

020288873

AUTHENTICATION: 1762235

DATE: 05-07-02