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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

(Name of foreign limited liability in is organized)  2/2002 (Date of Organization)  1 Qualification (Date first transacted business in Florida. (See section)  (Street address of partial liability company is a manager-managed consusual business addresses of the managing member of J. Leder, 5200 Town Center Circle, #470, Boca Raton, Fl. 300 Raton, Fl.	(FEI number, if applicable)  PRICUAL  (Duration: Year limited liability company will cease to exist or "perpetual")  ctions 608.501, 608.502, and 817.155, F.S.)
iction under the law of which foreign limited liability ny is organized)  2/2002 5.  (Date of Organization)  1 Qualification  (Date first transacted business in Florida. (See sec Town Center Circle, #470, Boca Raton, FL 33486  (Street address of particular distributions)	(FEI number, if applicable)  PERPETVAL  (Duration: Year limited liability company will cease to exist or "perpetual")  ctions 608.501, 608.502, and 817.155, F.S.)
(Date of Organization)  1 Qualification (Date first transacted business in Florida. (See sec Town Center Circle, #470, Boca Raton, FL 33486  (Street address of particular distributions)	(Duration: Year limited liability company will cease to exist or "perpetual")  ctions 608.501, 608.502, and 817.155, F.S.)
(Date first transacted business in Florida. (See sec Town Center Circle, #470, Boca Raton, FL 33486  (Street address of partied liability company is a manager-managed con usual business addresses of the managing member	principal office)
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nited liability company is a manager-managed con usual business addresses of the managing membe	<u></u>
usual business addresses of the managing membe	
	mpany, check here x
at today 5300 Tana Carroy Cirole #470 Roca Raton Fi	ers or managers are as follows:
3 J. Leger, 3200 Town Center Circle, #470, Doca Raion, 11	
ger R. Krouse, 5200 Town Center Circle, #470, Boca Rator	
hed is an original certificate of existence, no more than 90 day ction under the law of which it is organized. (A photocopy is n of the certificate under eath of the translator must be submitt	s old, duly authenticated by the official having custody of records in not acceptable. If the certificate is in a foreign language, a ed.)
ure of business or purposes to be conducted or pr	romoted in Florida:
ng Company	7
	•
Signature of a member or an autho	rized representative of a member.
(In accordance with section 608.408(3), F.S., an affirmation under the penalties of perjury	the execution of this document constitutes
C. Deryl Couch	NINE ALL INTER AND THE ARE IN A 11 MAN

## 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:	/ <del>- 2</del>
Sun ACT, LLC		
2. The name and the Florida street add	dress of the registered agent and office are:	The same of the sa
CT Corporation System		
	(Name)	3000
c/o C T Corporation System	n, 1200 South Pine Island Road	, •
Florida stree	et address (P.O. Box NOT ACCEPTABLE)	
Plantation	FL 33324	
	City/State/Zin	

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..

C T Corporation System

PETER F. SOUZA
ASSISTANT SECRETARY

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

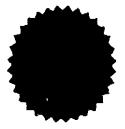
## Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUN ACT, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO PAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF AUGUST, A.D. 2002.

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





Harrier Smith Windsor, Secretary of State

AUTHENTICATION: 1938332

DATE: 08-15-02

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