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|   |    | 77.7 |

ACCOUNT NO. : 072100000032

REFERENCE

COST LIMIT : \$ 155.00

ORDER DATE : September 12, 2002

ORDER TIME : 9:55 AM

ORDER NO. : 741389-005

CUSTOMER NO: 4144A

500007693695--9

CUSTOMER: Ms. Michelle Baserva

Holland & Knight Llp

Suite 3000

701 Brickell Avenue Miami, FL 33131

#### FOREIGN FILINGS

NAME: 7900 N.W. AVENUE, LLC

XXXX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX\_\_\_\_ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER:

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

| IN COMPLIANCE WITH SECTION 608.503, FLORIDA S                                   |                       |   | ITTED TO REC                          |                 | REIGN   |
|---|-----------------------|---|---------------------------------------|-----------------|---------|
| LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS                                  | S INTHE STATE C       | FFLORIDA:                                 |                                       | 新門              |         |
| 1. 7900 N.W. Avenue, LLC  | <u> </u>              | 4   |                                       | SSI<br>SSI      |         |
| (Name of fo   | oreign limited liab   | ility company)                            |                                       | FOF PA          |         |
| 2. Delaware   | 3                     |   |                                       | FLOR<br>FLOR    | ·<br>}  |
| (Jurisdiction under the law of which foreign limited lial company is organized) | bility                | (FEI number, if                           | applicable)                           | RIDA            | ?       |
| 4. June 25, 2002  | 5. Perpe              | tval                                      |                                       |                 |         |
| (Date of Organization)  | (Dura                 | tion: Year limited liab<br>exist or "perp | ility company w<br>etual")            | ill cease to    | ** :·   |
| 6. <u>September 1, 2002</u>   |                       |   |                                       |                 |         |
| (Date first transacted business in Florid                                       | la. (See sections 6   | 08.501, 608.502, and 8                    | 317.155, F.S.)                        | ·               |         |
| 7. 30 Broad Street, 31st Floor, New York, 1                                     | NY 10004              |   |                                       |                 |         |
|   |                       |   | · · · · · · · · · · · · · · · · · · · | <del></del>     |         |
| (Street o   | address of principa   | l office)                                 | <u> </u>                              |                 |         |
| (Sueet a  | address of principa   | i omce)                                   |                                       |                 |         |
| 8. If limited liability company is a manager-man                                | naged company         | , check here 🗶                            |                                       |                 |         |
| 0.00  |                       | _   |                                       |                 |         |
| 9. The name and usual business addresses of the                                 | e managing me         | mbers or managers                         | are as follov                         | vs:             |         |
| 7900 N.W. Avenue, MM, LLC   |                       |   |                                       |                 |         |
|   |                       |   | <u>-</u>                              |                 |         |
| 30 Broad Street, 31st Floor   |                       |   | <u> </u>                              | <u>.</u> .      |         |
|   |                       |   |                                       |                 |         |
| New York, NY 10004  |                       |   |                                       |                 |         |
|   |                       |   |                                       |                 |         |
|   |                       |   |                                       | · · · · · ·     |         |
| 10. Attached is an original certificate of existence, no more to                | than 90 days old, d   | uly authenticated by the                  | official having o                     | oustody of reco | ords in |
| the jurisdiction under the law of which it is organized. (                      |                       |   | ficate is in a fore                   | ign language,   | a       |
| translation of the certificate under oath of the translator n                   | must be submitted.    | )   |                                       |                 |         |
| 11. Nature of business or purposes to be conduc                                 | .tad an mnamata       | din Dlowido                               |                                       |                 |         |
| 11. Tracare of business of purposes to be conduc-                               | sted of profffore     | u m Florida: Real                         | Estate Deve                           | elopment.       |         |
|   |                       | _   |                                       |                 |         |
| Total Damis   |                       |   |                                       |                 | ·       |
| Signature of a member or  | an authorized r       | enresentative of a                        | member                                |                 |         |
| (In accordance with section 608.40  | 08(3), F.S., the exec | ation of this document co                 | onstitutes                            |                 |         |

Lynn C. Washington, Authorized Representative of a Member Typed or printed name of signee

an affirmation under the penalties of perjury that the facts stated herein are true.)

## 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:                                   | 02 SEP 12<br>SECRETAR |
|--|-----------------------|
| 2. The name and the Florida street address of the registered agent and office are: | PM 2:<br>COF STA      |
| Lynn C. Washington, Esq., c/o Holland & Knight LLP (Name)                          | Ot :                  |
| 701 Brickell Avenue, Suite 3000 Florida street address (P.O. Box NOT ACCEPTABLE)   | i striker             |
| Miami FL 33131 (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)

# Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "7900 N.W. AVENUE, 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 ELEVENTH DAY OF SEPTEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "7900 N.W. AVENUE, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JUNE, A.D. 2002.

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



Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1976527

- DATE: 09-11-02

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