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CORPORATION(S) NAME

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1. Ralp SPE GP, LLC		200	* -
2. O-CG Equity GP, LLC		<u> </u>	,
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615	h		,

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 FO LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: RALP SPE GP, LLC (Name of foreign limited liability company) DELAWARE APPLIED FOR (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) SEPTEMBER 25, 2002 PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") UPON FILING OF THIS APPLICATION (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 7. 4669 SOUTHWEST FREEWAY, SUITE 700 HOUSTON, TEXAS 77027 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 🗶 9. The name and usual business addresses of the managing members or managers are as follows: JOHN JACOBSSON - 1301 AVENUE OF THE AMERICAS, 38TH FLOOR NEW YORK, NEW YORK 10019 IRA MITZNER - 4669 SOUTHWEST FREEWAY, SUITE 700 HOUSTON, TEXAS 77027 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 conditated or promoted in Florida: OWNERSHIP, OPERATION AND MANAGEMENT OF A GENERAL PARTNERSHIP. 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.)

Typed or printed name of signee

IRA MITZNER, MANAGER

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.

	• •
	RALP SPE GP, LLC
2.	The name and the Florida street address of the registered agent and office are:
	CT CORPORATION SYSTEM
	(Name)
	1200 SOUTH PINE ISLAND ROAD
	Florida street address (P.O. Box NOT ACCEPTABLE)
	•
	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.

CONNEL BRYAN
PROME ASSESSMENT OF STREET

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)

Delaware

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RALP SPE GP, 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 TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2002.

FILED

02 DOT -T PN 2: 21

SECRETARIOS SEE, FLORIDA



Darriet Smith Windson

Harriet Smith Windson, Secretary of State

3572738 8300 AUTHENTICATION: 2002049

DATE: 09-25-02

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