TEL.: (631) 669-6400 FAX: (631) 669-6482

E-MAIL: jpetrizzo@paesq.com

October 7, 2002

VIA CERTIFIED MAIL & RRR

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: A.M.F. Capital, LLC

000008314790--0 -10/10/02-01093-002 ****125.00 ****125.00

Gentlemen:

MO2-2705

This office represents A.M.F. Capital, LLC in connection with the limited liability company's transaction of real estate business in Florida. In connection therewith and pursuant to Section 608.503(1) of the Florida Statutes, enclosed please find the following:

- 1. Executed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, together with an original Certificate of Good Standing from the New York State Secretary of State;
- 2. Executed Certificate of Designation of Registered Agent/Registered Office
- 3. This firm's escrow check made payable to the Florida Department of State in the amount of \$125.00, representing the \$100.00 filing fee for the Application as well as the \$25.00 filing fee for the Designation of Registered Agent.

Kindly forward your letter of acknowledgement to this office at your earliest convenience and return the enclosed postcard to signify your receipt of these documents.

Should you require anything further concerning this matter, please do not hesitate to contact this office.

Very truly yours,

OTHS I PETRIZZO

LJP/af Encs.

cc: A.M.F. Capital, LLC

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: A.M.F. Capital, LLC (Name of foreign limited liability company) State of New York (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) June 18, 2002 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") August 13, 2002 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 99 Woodbury Road, Hicksville, New York 11801 (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: See annexed Schedule "A" 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 conducted or promoted in Florida: to own and operate a real estate company and any and all related business. 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.) John Marin Typed or printed name of signee

SCHEDULE "A"

Name of Member	Address of Member	
ALLAN A. LIPPOLIS	6 Greenbriar Lane Dix Hills, NY 11746	
THOMAS G. LANZARO	17 Barrington Place Melville, NY 11747	· . ·
STANLEY SHAPIRO	2 Rawlings Drive Melville, NY 11747	
JOHN MARIN	1 Wright Drive Dix Hills, NY 11746	_
HOWARD J. FEIN	10 WindemereWay Woodbury, NY 11796	SECRETARY NISION OF CO
SAMUEL J. AZUS	2767 Mae Court Bellmore, NY 11710	OF STATE ON
DANIEL COAKLEY	27 Elizabeth Drive Laurel Hollow, NY 11791	

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:		
	A.M.F. Capital, LLC		
2.	The name and the Florida street address of the registered agent and office are:		
	John Marin (Name)	DIVISIO	
	90 Island Estates Parkway Florida street address (P.O. Box NOT ACCEPTABLE)	N OF CORP	
	Palm Coast, FL 32135 (City/State/Zip)	OKA 3: 54	STATE

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)

JOHN MARIN

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

State of New York State State

I hereby certify, that A.M.F. CAPITAL, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/18/2002, and that the Limited Liability Company is subsisting so far as shown by the records of the Department.

I further certify, that no other documents have been filed by such Limited Liability Company.



Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of September two thousand and two.

Secretary of State

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