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: NATIONAL CORPORATE RESEARCH, LTD.

Account Number : 120000008088

Phone

: (800)221-0102

Fax Number

: (212)564-6083

TED LIABILITY COMPANY

Palm Beach Park Centre 5 LLC

** * *	
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APPLICATION BY FOREIGN LIMITED LIABILITY COMP TRANSACT BUSINESS IN FLO

I L	IN COMPLIANCE WITH SECTI LIMITED LIABILITY COMPANY	ON 608.503, FLORID TOTRANSACTIBUSE	DA STATUTES NESS IN THE !	THE FOLLOWA STATE OF FLORIL		
1	PAIM BEACH PARK CENTRE 5 LLC (Name of foreign limited liability count					
	m _ r	(Name	of foreign lim	ited liability comp		
2	2 Delaware		3.	<u> </u>		
	(Jurisdiction under the law of company is	organized)	d linbility	्री		
4,	4. October 18, 20	02	5.	perpetual _		
	(Date of Organ	zation)		(Duration: Year		
б.	6. upon qualification					
	(Date first transacted business in Florida. (See sections 608.501, 60					
7.	7. 15 Malden Lane, Sulte 1300, New York, NY 10038					
	(Street address of principal office)					
8.	8. If limited liability company is a manager-managed company, check is					
9,). The name and usual business addresses of the managing members or					
	Melvin Heller	- ··	15 Malden	Lane, Suite 1		
,	,					
10.	O. Attached is an original certificate the jurisdiction under the law or translation of the certificate and translation of the certificate and translation.	f which it is organized	i. (A photocop	ry is not acceptable		
11.	 Nature of business or pu 	poses to be cond	lucted or pro	moted in Flori-		
_	To own and operate real estate and any lawful activity					
	,					
	Signat	ne of a member	or an author	ized represents		
	(In accor	dance with section 601 when under the panals	1.408(J), F.S., d	e execution of this		
		en Gleicher – 🛕				
			printed nan			

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CERTIFICATE OF DESIGNATE REGISTERED AGENT/REGISTER

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 600 THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITTED TO DESIGNATE A REGISTERED OFFICE AND STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

PALM BEACH PARK CENTRE 5

2. The name and the Florida street address of the registered agen-

National Corporate Research, (Name) 103 N. Meridian Street Florida street address (P.O. Box NOT ACC: Tallahassee FL (City/State/Zip)

Having been named as registered agent and to accept service of pr liability company at the place designated in this certificate, I hereb registered agent and agree to act in this capacity. I further agree t statutes relating to the proper and complete performance of my du accept the obligations of my position as registered agent as provid-

PRAN WAGNER, ASST. SECY

\$ 100.00 Filing Fee for App \$ 25.00 Designation of Req

\$ 30.00 Certified Copy (op

\$ 5.00 Certificate of State

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