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ACCOUNT NO. : 07210000032

REFERENCE : 840836 4303929

AUTHORIZATION

COST LIMIT : \$ 125.00

CODI IIIIII . Q 125.00

ORDER DATE: December 3, 2002

ORDER TIME : 9:57 AM

ORDER NO. : 840836-005

CUSTOMER NO: 4303929

CUSTOMER: Ms. Sandra L. Blake

Greenberg Traurig, P.a. 1221 Brickell Avenue

21st Floor

Miami, FL 33131-3238

FOREIGN FILINGS

NAME: CAYRE BISCAYNE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
X 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

	CAYKE BISCAYNE LLC	/N/home of fermion lim	nited (lability company)
		•	mind partitly exhibinity
7 () () ()	DELARARE diction under the law of which foreign	3.	(FEI number, if applicable)
(Amare	combany is organized) combany is organized)	immico manniy	(FEI number, or applicable)
	August 2, 2002 (Date of Organization)	S.	PERPRICAL.
	(Date of Organization)		PERPETUAL. (Duration: Year limited liability company will coase to exist or "perpetual")
	. Oct	ober 1. 20	02
	(Date first transacted busine	ss in Florida. (See se	02 ections 508,501, 508,502, and 817,155, F.S.)
	417 Fifth Avenue, 9th 1	Floor	
	New York, NY 10016		02 SEG
· · · · · · · · · · · · · · · · · · ·		(Street address of	principal office)
TF löw	nited lizbility company is a man		principal offices
44 8934	men neomia combana z z man	saget-managed eq	ompany, check here 🛛
The r	name and usual business addres	ses of the managi	ing members or managers are as follows:
		Cayre	TAJE
	1		Sm
	Midi	town Equiti	es LLC
	417	Fifth Aven	ue, 9th Floor
		York, NY	
		* ** <u>*********************************</u>	
	Milisan original prolificate of existence	, no more than 90 day	sold, duly sulbenicated by the official baving custody of record
Attach			ny isant amenable. If the certificate is in a faction baronage, a
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ine jur tarsla	risdiction under the law of which it is on along of the contilicate under cath of the t	translator must be sub	anited)

Daniel Pfeffer

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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:			
CAYRE BISCAYNE LLC			
2. The name and the Florida street address of the registered agent and office are:	_		
Corporation Service Company		<u>ئ</u> ىسىز	
(Name)	SECRET ALLAHA	02 原	,
1201 Hays Sarget	SS		=
Florida street address (P.O. Box NOT ACCEPTABLE)	Y OF S	る。重	
Talluhasuec FL 32361	33		
(Ciry/State/Zip)	Sw (# 33 # 33 # 33 # 33 # 33 # 33 # 33 # 33	
Having been named as registered agent and to accept service of process for the above sta liability company at the place designated in this certificate, I hereby accept the appointme registered agent and agree to act in this capacity. I further agree to comply with the prov statutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 608.	ent as visions o with and	fall	
Brian Courtney (Signature) Asst. V. Pres.			5
\$ 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 "CAYRE BISCAYNE 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 THIRD DAY OF DECEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAYRE BISCAYNE LLC" WAS FORMED ON THE SECOND DAY OF AUGUST, A.D. 2002.

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



AUTHENTICATION: 2119298

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