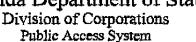
FEB-25-03 03:57

Florida Department of State



Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H030000631967)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From: Diana M. Guerra, Paralegal, Ext. 4546

ACCOUNT Name : AKERMAN, SENTERFITT & EIDSON, P.A.

Account Number : 075471001363 Phone : (305)374-5600 Fax Number : (305)374-5095

FOREIGN LIMITED LIABILITY COMPANY

Palm Plaza Partners, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

30428-135960

I.D.: 0748

FAX AUDIT #: H03000063196 7

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

IN COMPLIANCE WITH SECTION COLSE, FLORIDA STATUTES, THIS POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LOWIED LIABILITY COMPANTIO TRANSACTRUSINESS IN THE STATE OF FLORIDA: Palm Plaza

	- Avances at water the text of the profits and the second as
2. राष्ट्राह	Companied (Figure 1997)
4	2.3.03 (Direction: Year lighted Hability company will coase to
6. <u></u>	(Crass Siff Wangaring brainings in Flenica. (See persons 608-50%, 608-502, and 817-183, F.R.)
7	257 E. Maio Street
4	Province and the Color of Principal attacks of Principal attacks
8. Kli	mised liability company is a manager-managed company, check here
9. The	usual business addresses of the managing members or managers are as follows:
	257 E. Nan Street
	Borrington II 60010
10. And	ched is an original actificate of existance no more from 90 days old, duly achientescal by the official baving custody of record Resign under the law of which it is covarized. (A physicanty is retracted to the custificate is in a forder language, a

nandation of the certificate under only of the translator must be submitted.)

I.I. Nature of business or purposes to be conducted or promoted in Florida: Y

Signature of a manner of all supported representative of a member. (In secondance with section offs. (Offs.), F.S., the recomment of this document non-situates an affirmation under the personal project had the those second herein are used)

Arean Kye Ten Typed 84 printed name of signor

TRANS-TRAIN CO STANDARD

FAX AUDIT #: H03000063196 7

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: PALM PLAZA PARTNERS, L.L.C.
- 2. The name and the Florida street address of the registered agent and office are:

 American Information Services, Inc.

 One S.E. 3rd Avenue, 28th Floor

 Miami FL 33131

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.

American Information Services, Inc.

Diana M. Guerra, Assistant Secretary

FAX AUDIT #: H03000063196 7

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PAIN PLAZA PARTNERS, L.L.C." 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 FEBRUARY, A.D. 2003.



Harrier Smith Windsor, Secretary of State

AUTHENTICATION: 2240105

FAX ADDIT #: H03000063196 7