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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

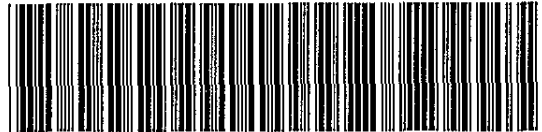
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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05/09/03--01086--018 \*\*130.00

RECEIVED  
03 MAY -9 PM 2:32  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
03 MAY -9 PM 2:56  
TALLAHASSEE, FLORIDA

BK

**CT CORPORATION**

May 9, 2003

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

FILED  
03 MAY -9 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Order #: 5848883 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

AB Green Lido Operator, LLC (DE)  
Registration  
Florida

AB Green Lido Operator, LLC (DE)  
Certificate of Status-Foreign  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at  
(850) 222-1092. Thank you very much for your help.

*Carrie Buz*

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

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;*

1. The name of the foreign limited liability company is: AB Green Lido Operator, LLC
2. The jurisdiction under the law of which foreign limited liability company or organized is: Delaware
3. The FEI number has been applied for.
4. Date of Organization: May 2, 2003.
5. The duration of the Company shall be perpetual.
6. The date the Company first transacted business in Florida is May 2, 2003.
7. The street address of the principal office shall be c/o The Raleigh Hotel, 40 Island Avenue, Miami, Florida 33139
8. The Company will be Member managed.
9. The name and usual business address of the sole Member is as follows:  
AB Green Lido, LLC  
c/o Greenfield Partners, LLC  
50 North Water Street  
South Norwalk, Connecticut 06854
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.
11. Nature of business or purposes to be conducted or promoted in Florida is for investing in, acquiring, owning, managing, operating, financing, developing and selling the real property commonly known as 1667 Washington Avenue, Miami Beach, Florida and such activities as are necessary, incidental or appropriate in connection therewith and no other purposes.

AB GREEN LIDO OPERATOR, LLC

By: AB Green Lido, LLC

By: Greenfield Hotels, LLC,  
Managing Member

By:   
Name: Barry P. Marcus  
Title: Senior Vice President

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

03 MAY -9 PM 2:56  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

AB Green Lido Operator, 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.*

Connie Bryan  
(Signature)

Connie Bryan, Special Asst. Secy.

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

# Delaware

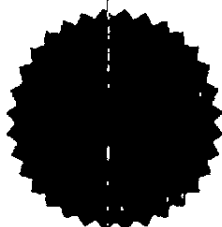
*The First State*

PAGE 1

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AB GREEN LIDO OPERATOR, 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 NINTH DAY OF MAY, A.D. 2003.

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



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2409014

3653620 8300

030302459

DATE: 05-09-03