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NE	Mail-out  W FILINGS  Profit  Non-Profit  Limited Liability  Domestication  Other  HER FILINGS  Annual Report	Will wait Photocopy C  AMENDMENTS  Amendment  Resignation of R.A., Officer/Director  Change of Registered Agent  Dissolution/Withdrawal  Merger  REGISTRATION/QUALIFICATION  XXX Foreign  Limited Partnership  Reinstatement	
NE	Mail-out  W FILINGS  Profit  Non-Profit  Limited Liability  Domestication  Other  HER FILINGS  Annual Report  Fictitious Name	Will wait Photocopy C  AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/QUALIFICATION XXX Foreign Limited Partnership	

Examiner's Initials



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 20, 2003

ATTORNEYS' TITLE

TALAHASSEE, FL

SUBJECT: MILLER TIME, L.L.C. Ref. Number: W03000014468



We have received your document for MILLER TIME, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

We cannot accept the CERTIFIED COPY OF THE CERTIFICATE OF FORMATION.

The certificate that you must submit is called a CERTIFICATE OF GOOD STANDING or a CERTIFICATE OF EXISTENCE. This is a one page certificate with no attachments. It states that the company is organized in Delaware AND that it continues in active existence. An example of this certificate is attached.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Corporate Specialist

Letter Number: 703A00031454

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

	*s w		
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STALLMITED LIABILITY COMPANY TO TRANSACT BUSINESS II		S SUBMITTED TO KIGI	ISTER A FOREIGN
MILLER TIME, L.L.C.		三	
(Name of fore	eign limited liability company	)	र्ज ता
2. DELAWARE	3. 05-0568905		至〇
(Jurisdiction under the law of which foreign limited liabil company is organized)	ity (FEI nu	imber, if applicable)	\$
4. MAY 8, 2003	5. MAY 8, 2053	- Din	8
(Date of Organization)	(Duration: Year limexist	ited liability company will or "perpetual")	ll cease to
6. MAY 16, 2003			
(Date first transacted business in Florida.	(See sections 608.501, 608.5	02, and 817.155, F.S.)	
7. 1390 SOUTH DIXIE HIGHWAY, SUITE 2	123		<del></del>
CORAL GABLES, FLORIDA 33146	· · · · · · · · · · · · · · · · · · ·	•	
(Street add	dress of principal office)		
8. If limited liability company is a manager-mana	iged company, check her	e 🗹	
9. The name and usual business addresses of the	managing members or m	anagers are as follow	/S:
HAROLD D. WHITE, 1390 S. Dixie High	way, Suite 2123, Cora	I Gables, FL 33146	5
BRIAN A. McBRIDE, 1390 S. Dixie High	way, Suite 2123, Cora	Gables, FL 33146	5
ROBERT GUTIERREZ, 1390 S. Dixie Hi	ghway, Suite 2123, Co	oral Gables, FL 33	146
	<u> </u>		
	,		<del></del>
10. Attached is an original certificate of existence, no more the the jurisdiction under the law of which it is organized. (A translation of the certificate under eath of the translator management.)	photocopy is not acceptable.		
11. Nature of business or purposes to be conducted	ed or promoted in Florid	a: BOAT CHARTE	R
Haused J	Sar hate	· ———	
Signature of a member or a	en authorized representat	ive of a member.	<u></u>
(In accordance with section 608.408 an affirmation under the penalties of	8(3), F.S., the execution of this d	ocument constitutes	
LOUIS STINSON, JR.	es baster? crime one force amine the	THE TRUE STATES	
	inted name of signee		•

#### 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 FORLOWING

٠,	INTERMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERE	عالميريد	سيدين	CLI BUY
S	TATE OF FLORIDA.	المعادية	3	
			0	
		(m) ( )	25	
1	The name of the Limited Liability Company is:	و مانات	-	

2. The name and the Florida street address of the registered agent and office are:

STEWART AGENT SERVICES		
	(Name)	
2199 PONCE DE LEON	I BLVD., SUITE 301	
Florida street addr	ess (P.O. Box <u>NOT</u> ACCEPTABLE)	
CODAL CARLES	00404	

33134 JHAL GABLES (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.

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

i , ' , '

## Delaware

PAGE 1

#### The First State

I, HARRIET EMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MILLER TIME, 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 TWENTY-FIRST DAY OF MAY, A.D. 2003.

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

03 MN 20 M IO 48

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Daniet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2430480

DATE: 05-21-03