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Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 : (305)674~3313 Phone

Fax Number : (305)674-3359

FOREIGN LIMITED LIABILITY COMPANY

BLOSSOM II, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 92'04 |
| Estimated Charge | \$125.00 |





FLORIDA DEPARTMENT OF STATE Glenda E: Hood Secretary of State

May 28, 2003

ALA CORPORATE SERVICES, INC.

SUBJECT: BLOSSOM II, LLC

REF: W03000015039

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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) 245-6025.

Trevor Brumbley Document Specialist FAX Aud. #: H03000202011 Letter Number: 903A00033349 03 MAY 30 PM 4: 14

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

IN COMPLANCE WITH SECTION GOSSOS, FLORIDA STATUTIES, THE FOLLOWING IS SUBMITTED TO REGISTER A PORTEGO LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: , Blossom II, LLC (Name of foreign limited liability company) 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) Perpetual (Duration: Year limited liability company will cease to (Date first transacted business in Florida, (See sections 608,501, 608,502, and 817,155, F.S.) 23 Meeting House Rd. Greenwich, CT 06831 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Cynthia Licata, Managing Member MCRM MEETING GREENWICH CT 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under cath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: real estate management Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the exacution of this document constitutes an affirmation under the penulties of perjury that the facts stated berein are true)

Typed or printed name of signee

Cynthia Licata

H030002020110

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 | e Limited Liability Company is: | | : |
|--|---|-------------|-----|
| 2. The name and | the Florida street address of the registered agent and office are: | • | |
| | A1A REGISTERED AGENT INC. | | |
| _ | (Name) | | |
| | 25 SE 2ND AVE. SUITE 1036 | | |
| | Florida street address (P.O. Box NOT ACCEPTABLE) P.O. | 03 | - |
| | MIAMI FL 33131 | | |
| liability company a registered agent an statutes relating to | (City/State/Zip) d as registered agent and to accept service of process for the above stated limited the place designated in this certificate, I hereby accept the appointment as ad agree to act in this capacity. I further agree to comply with the provisions of all the proper and complete performance of my duties, and I am familiar with and poss of my position as registered agent as provided for in Chapter 608, F.S. | 30 PM 4: 14 | TE |
| Paul Smo | (Signature) | | ÷ • |

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLOSSOM II, 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 TWENTY-SECOND DAY OF MAY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLOSSOM II, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MAY, A.D. 2003.

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 2432283

DATE: 05-22-03