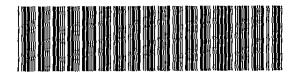
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(Requestor's Name)
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CAPITAL CONNECTION, INC.

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adima Medical Properties IIC	OF FILED IS
Signature Requested by: Date Time Welk In Will Rick In	Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Retrieval
Walk-In Will Pick Up	Courier

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A ROREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	MEDICAL PROPERTIES LLC (Name of foreign	n limited liability company)
W . 1		2 20 011/2/2
Delaware Junadiction	under the law of which foreign limited liability	3_20-0315262 (FEI number, if applicable)
,,	company is organized)	(
October	17 2003	5 Perpetual
	(Date of Organization)	(Duration: Year limited liability company will cease to
		exist or "perpental")
Upon Fil	ing of this Application	
	(Date first transacted business in Florida, (S	ce sections 608.501, 608.502, and 817.155, F.S.)
101 Richard	dson Street, Brooklyn, New York, 11211	
	(Street addre	ss of principal office)
If limited	liability company is a manager-manage	ed company, check here
_,,		
The name	and usual business addresses of the ma	anaging members or managers are as follows:
Marattan - 1	14a	
Nadima	Mezzanine Borrower LLC - member	101 Richardson Street, Brooklyn, NY 11211
		ries
		
		·-
Attached is	s an original certificate of existence, no more than	n 90 days ald duly authenticated by the official having exercts o
. Attached is	s an original certificate of existence, no more that	n 90 days old, duly authenticated by the official having custody of a photocopy is not acceptable. If the certificate is in a foreign l
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the jurisdic translatio	ction under the law of which it is organized. (As no of the certificate under eath of the transfer business or purposes to be conducted Signature of a member or an (In accordance with section 608.408(3))	a photocopy is not acceptable. If the certificate is in a foreign I relator must be submitted.) or promoted in Florida: Acquire, own, develop or hold authorized representative of a member. p. F.S., the execution of this document constitutes
the jurisdic translatio	ction under the law of which it is organized. (As no of the certificate under eath of the transfer business or purposes to be conducted Signature of a member or an (In accordance with section 608.408(3))	a photocopy is not acceptable. If the certificate is in a foreign I islator must be submitted.) or promoted in Florida: Acquire, own, develop or hold authorized representative of a member.
the jurisdic translatio	Signature of a member or an affirmation under the penalties of Aline	a photocopy is not acceptable. If the certificate is in a foreign I relator must be submitted.) or promoted in Florida: Acquire, own, develop or hold authorized representative of a member. p. F.S., the execution of this document constitutes

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.

l.	The name of the Limited Liability Company is:
K	ADIMA MEDICAL PROPERTIES LLC
2.	The name and the Florida street address of the registered agent and office are:
	JERRY JOSEPH
	(Name)
	100 GOLDEN ISLES DRIVE, SUITE 1204 Florida street address (P.O. Box NOT ACCEPTABLE)
	HALLANDALE BEACH FL 33009 (City/State/Zip)
	(City, Status 211)
li ri si	laving been named as registered agent and to accept service of process for the above stated limited ability company at the place designated in this certificate, I hereby accept the appointment as egistered agent and agree to act in this capacity. I further agree to comply with the provisions of altatutes 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.
-	(Signature) JERRY JOSEPH
	\$ 100.00 Filing Fee for Application

\$ 25.90 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 CERTIPY "KADIMA MEDICAL PROPERTIES 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 TWENTIETH DAY OF FEBRUARY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KADIMA MEDICAL PROPERTIES LLC" WAS FORMED ON THE SEVENTEENTH DAY OF OCTOBER, A.D. 2003.

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

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Harries Smith Windsor, Secretary of State

AUTHENTICATION: 2942862

DATE: 02-20-04