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| (Requestor's Name) | | | | |
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| (Address) | | | | |
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| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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ACCOUNT NO. : 072100000032 REFERENCE 5,8709,0 AUTHORIZATION COST LIMIT : \$ 125.00 ORDER DATE: April 23, 2004 ORDER TIME : 11:03 AM ORDER NO. : 587090-020 CUSTOMER NO: 4320209 CUSTOMER: Cathy Benanti, Esq. Cassin, Cassin & Joseph 20th Floor 711 3rd Avenue New York, NY 10017 FOREIGN FILINGS NAME: SHOWCASE PROPERTIES LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY ___ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER:

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. | SHOWCASE PROPERTIES LLC |
|--------------|---|
| | (Name of foreign limited liability company) |
| 2. | Delaware3. 27-0084760 |
| | (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) |
| 4. | 3/11/04 5. Perpetual |
| | (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. | Upon Filing |
| | (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)) |
| 7. | 2711 Centerville Road, Suite 400 |
| | Wilmington, Delaware 19808 |
| | (Street address of principal office) |
| 8. | If limited liability company is a manager-managed company, check here |
| | |
| 9. | The names and usual business addresses of the managing members or managers are as follows: |
| | William R. Sigmund II |
| | 2738 NE 14th Street |
| | Ft Lauderdale, Florida 33304 |
| | |
| havi acce | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official ng custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not ptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator to be submitted.) |
| 11. | Nature of business or purposes to be conducted or promoted in Florida: Manage residential |
| | and/or commercial real property, condominiums and/or cooperative units. |
| | <u>OBrnani</u> |
| | Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) |
| | Caterina A. Benonti |
| | Typed or printed name of signce |

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: | | |
|--|------------------------------|-----|
| SHOWCASE PROPERTIES LLC | | |
| 2. The name and the Florida street address of the regis | stered agent and office are: | |
| Corporation Serv | vice Company | |
| (Name) | 04 TAN | |
| 1201 Hays | Street En | HY. |
| Florida strect address (P.O. Bo | SA ME | 52 |
| Tallahassee FL | 32301 Po 9 | |
| (City/State/Zip | TATE ORIDA | |
| Having been named as registered agent and to accept s liability company at the place designated in this certific | F | |

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.

Marshal Contains (Signature)

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

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHOWCASE 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 TWENTY-THIRD DAY OF APRIL, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SHOWCASE PROPERTIES LLC" WAS FORMED ON THE ELEVENTH DAY OF MARCH, A.D. 2004.

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

Namet Smith Vindson

Harrier Smith Windson, Secretary of State

AUTHENTICATION: 3070056

DATE: 04-23-04

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