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FOREIGN LIMITED LIABILITY COMPANY

CRT BM GP LLC

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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.	CRT BM GP LLC					
	(Name of Foreign Limited Liability Company)					
	DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)					
4.	July 14, 2004 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")					
6.	UPON QUALIFICATION					
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)					
7.	225 NE MIZNER BOULEVARD, SUITE 200					
	BOCA RATON, FL 33432					
8.	(Street Address of Principal Office) If limited liability company is a manager-managed company, check here ✓ The name and usual business addresses of the managing members or managers are as follows:					
9. The name and usual business addresses of the managing members or managers are as follows: 5. works. Thomas J. Crocker, Manager 225 NE Mizner Blvd., Suitz 200, Boca Raton, 31, 3343;						
	Thomas C. Brockwell, Manager 225 NE Mizner Blvd., Suite 200, Boca Raton, FL 33432					
	Victor A. Duva, Manager 1209 Orange Street, Wilmington, DL 19801					
the	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation of the certificate under outh of the translator must be submitted.)					
11.	. Nature of business or purposes to be conducted or promoted in Florida:					
	ANY LAWFUL ACTIVITY					
	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 penaltics of perjury that the facts stated herein are true,)					
	WILLIAM I WEDGE VICE PRESIDENT					

Typed or printed name of signee

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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	e of the Limited Liability Co	ompany is:	
CRT BM GP	LLC		
2. The name	e and the Florida street addr	ess of the registered agent and office are	::
	WILLIAM J. WEDGE		15 2
		(Name)	LEC.
	225 NE MIZNER BLVD.,	SUITE 200	表示に
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	BOCA RATON	FL 33432 City/State/Zip	8: 36 LORID
		on a comment	Qr.

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, Florida Statutes.

(Signature)

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

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRI EM GP LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO EAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF JULY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CRT BM GP LLC" WAS FORMED ON THE FOURTEENTH DAY OF JULY, A.D. 2004.

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

Harrion Smith Windson, Secretary of State

AUTHENTICATION: 3233339

DATE: 07-14-04

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