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OF CUF		GN LIMITED LIABILITY COMPANY Strauss Asset Management, 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:

July 11, 2001  (Date of Organization)  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)	scase to
July 11, 2001  (Date of Organization)  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)	scase to
(Date of Organization)  (Duration: Year limited liability company will exist or "perpetual")  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)	scase to
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	scase to
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	
341 Newbury Street	
m-m 1	
Boston, MA 02115	. 0
(Street Address of Principal Office)	₽
If limited liability company is a manager-managed company, check here	AUG
Trimities manifily configured is a distinglet-managed company, eneck nets [8]	9
The name and usual business addresses of the managing members or managers are as follows:	•
	=
Richard Strauss Philip Strauss	<del>- تع</del>
341 Newbury Street 341 Newbury Street	25
Boston, MA 02115 Boston, MA 02115	

## 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 Compan	y is:				
Strauss Asset Manager	ment, LLC			<u> </u>		
2. The name and t	he Florida street address of	the registered ag	ent and office are:			
	CTC	orporation System				
_		(Name)		_		
1200 South Pine Island Road						
Florida Street Address (P.O. Box NOT ACCEPTABLE)						
	Plantation	FL	33324			
City/State/Zip						
				5 5		
	l as registered agent and to a					
	t the place designated in this					
	act in this capacity. I further er and complete performance					
	osition as registered agent as					
c c	T Corporation System			De la companya de la		
By: Connie	Bryon Special As	But Secut				
	(Gignature)	- 1				

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

S 5.00 Certificate of Status (optional)



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

William Francis Galvin Secretary of the Commonwealth

August 17, 2004

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

#### STRAUSS ASSET MANAGEMENT, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on July 11, 2001.

I further certify that said Limited Liability Company has not filed a certificate of cancellation; and that, so far as appears of record, said Limited Liability Company has legal existence.



In restimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

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