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(Requestor's Name)	
(Address)	30004100316;
(Address)	30004100310
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	TALLAII
(Business Entity Name)	04 SEP 21 PH 2: 1
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REFERENCE : 890816

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AUTHORIZATION : "

COST LIMIT : \$ 125.00

ORDER DATE: September 17, 2004

ORDER TIME : 2:05 PM

ORDER NO. : 890816-020

CUSTOMER NO: 4809298

CUSTOMER: Ms. Beatrice Kwok

Riker, Danzig, Scherer,

Po Box 1981

Morristown, NJ 07962

FOREIGN FILINGS

NAME: GDC HICKORY, LLC

XXXX QUALIFICATION (TYPE: LL)

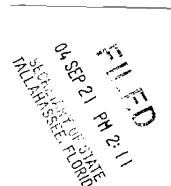
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

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:

(Name of Foreign Limited Liability Company)

1. GDC Hickory, LLC

New York	3. 13-3807228
(Jurisdiction under the law of which foreign limited liabilit company is organized)	y (FEI number, if applicable)
1. December 17, 2003	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to
Hickory Associates (Fl. registrati	exist or "perpetual") Lon number GP0100000345 and EIN 13-3807228
o. converted into GDC Hickory, LLC in	New York
(Date first transacted business in (See sections 608.501 & 608.502 l	Florida, if prior to registration., F.S. to determine penalty liability)
7. 245 Saw Mill River Road	
Hawthorne, NY 10532	
(Street Addr	ess of Principal Office)
3. If limited liability company is a manager-manag	ged company, check here 🗹
9. The name and usual business addresses of the m	nanaging members or managers are as follows:
Martin Ginsburg - c/o Ginsburg Develop	oment Company, 245 Saw Mill River Road,
Hawthorne, New York 10532; Samuel Gins	sburg - c/o Ginsburg Development Company,
245 Saw Mill River Road, Hawthorne, Ne	w York 10532
	90 days old, duly authenticated by the official having custody of records i copy is not acceptable. If the certificate is in a foreign language, a submitted.)
11. Nature of business or purposes to be conducted	d or promoted in Florida: apartment owner
(In accordance with section 608.408(3	authorized representative of a member. 3), F.S. the execution of this document constitutes perjury that the facts stated herein are true.) CINSBURG
Typed or prin	ated name of signee

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	of the Limited Liability	Company is:
GDC Hickory	, LLC	
2. The name a	and the Florida street ad	dress of the registered agent and office are:
	Corporation Servi	ce Company
		(Name)
	1201 Hays Street	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee	FL_32301
		City/State/Zip

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.

By: Debond Depper

Deborah D. Skipper Asst. V. Pres.

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

State of New York Department of State State

I hereby certify, that GDC HICKORY, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/17/2003, and that the Limited Liability Company is subsisting so far as shown by the records of the Department.



Witness my hand and the official seal of the Department of State at the City of Albany, this 16th day of September two thousand and four.

Secretary of State

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