# MU4000004400

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





900041712209

04 OCT 15 PH 12: 42

WE CHIVED



ASTOR SON STANK ACCOUNT NO. : 072100000032 REFERENCE: 926162 4374025

AUTHORIZATION

COST LIMIT :

ORDER DATE: October 13, 2004

ORDER TIME : 9:51 AM

ORDER NO. : 926162-010

CUSTOMER NO: 4374025

CUSTOMER: Ms. Michelle Scagliarini

Investcorp International, Inc.

36th Floor

280 Park Avenue

New York, NY 10017

#### FOREIGN FILINGS

NAME: CYPRESS ENTERPRISE, LLC

XXXX QUALIFICATION (TYPE: CQ)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY \_\_\_\_\_ PLAIN STAMPED COPY

\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

TATE OF THE PARTY OF THE PARTY

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

IN COMPLIANCE WITH SECTION 608503, 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	Lia	ibility Company)
elaware	3	20-1629018
urisdiction under the law of which foreign limited liability ompany is organized)		(FEI number, if applicable)
September 17, 2004	5.	perpetual
(Date of Organization)	-	(Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business in I (See sections 608,501 & 608.502 F.		
250 PARK Avenue, 3600		
NewYork M 10017 (Street Address		
(Street Addres	S O	т Ртіпсіраї Отпсе)
If limited liability company is a manager-manage	d c	ompany, check here
The name and usual business addresses of the ma	nag	ging members or managers are as follows:
Edward Lord, President 280 Park Avenue	361	W, New York, NY 10017
John R. Fraser, VP/Treasurer 280 Park F	ve	nue 36W, New York, NY 10017
F. Jonathan Dracos, VP/Secretary 280 Pa	rk	Avenue 36W, New York, NY 10017
jurisdiction under the law of which it is organized. (A photocouslation of the certificate under oath of the translator must be su	py bmi	itted.)
. Nature of business or purposes to be conducted		•
-ppropriate, proper, advisable, incid	er	ital or convenient to the ownership
Signature of a member or an entire (Infaccordance with section 608.408(3), an affirmation under the penalties of positions of the penalties of positions are section for the penalties of positions are sections.	atl F.S	norized representative of a member, the execution of this document constitutes
Michelle L. Scagliarini		
Typed or printe	ed r	same of signee

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

3

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 l	Limited Liability Company is:	
Cypress Enterpris	se., LLC	
2. The name and the	e Florida street address of the registered agent and office are:	
Cor	rporation Service Company	
	(Name)	
120	01 Hays Street	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	•
Tall	lahassee 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: Deligrah O. Skipper (Signature) Asst. V. Pres.

Corporation Service Company

\$ 100.00 Filing Fee for Application
\$ 25.00 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 CERTIFY "CYPRESS ENTERPRISE, 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 FIFTEENTH DAY OF OCTOBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CYPRESS ENTERPRISE, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2004.



AUTHENTICATION: 3412883

DATE: 10-15-04

3856087 8300

040744757