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ACCOUNT NO. : 072100000032

REFERENCE: 966806 5030437

AUTHORIZATION

COST LIMIT

ORDER DATE: November 11, 2004

ORDER TIME : 11:33 AM

ORDER NO. : 966806-035

CUSTOMER NO: 5030437

CUSTOMER: Mr. Seth M. Messner

Katten Muchin Zavis Rosenman

Suite 700, 1025 Thomas Jefferson N.w. East Lobby Washington, DC 20007

FOREIGN FILINGS

NAME: POWERMINN 9090 LR2, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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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 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

· — ·	0 LR2, LLC	m I imited I i	ability Company)		
	(rante or i orea		• • •	•	
Delaware		3.	20-1831075		
(Jurisdiction under t company is organize	he law of which foreign limited	d liability	(FEI numb	er, if applicable)	_
October 29, 2		5.		500	_
(Date	of Organization)		(Duration: Year limited exist or "perpetual")	nability company will cease	
	Date first transacted by	cinece in Flor	ida, if prior to registration.)		-
	(See sections 608.501 &	508.502 F.S.	to determine penalty liabilit	b) (A.Z.)	
2295 Corporat	e Boulevard, NW, STE	222		F. F.	<u>š</u> —
Boca Raton, F				ORI	: 39
	(Štr	et Address o	f Principal Office)	D' -	_
TITO TIMETIO MILE N					
Salipa Enter	i			gers are as follows:	
	prises, Inc.			S an a o o o o o o o o o o o o o o o o o o o	_
Salipa Enter	prises, Inc.			5	
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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.

. The name	and the Florida street add	dress of the registered agent and office	are:
	Corporation Servi	ce Company	
		(Name)	
•	1201 Hays Street	et Address (P.O. Box NOT ACCEPTABLE)	<u>_</u>
	Tallahassee	FT 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.

Corporation Service Company

By: Ollow A Skipper

(Signature) 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)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POWERMINN 9090 LR2, 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 ELEVENTH DAY OF NOVEMBER, A.D. 2004.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POWERMINN 9090 LR2, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF OCTOBER, A.D. 2004:



Variet Smith Windson, Secretary of State

AUTHENTICATION: 3470963

DATE: 11-11-04

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