Florida Department of State

Division of Corporations Public Access System

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TO:

Division of Corporations

Fax Number : (850) 205-0383

Prom:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850)222-9428

or co	EIGN LIMITED LIABILITY COMPANY				
O4 UEC	Certificate of Status	2			
5 3	Certified Copy	2			
	Page Count	04			

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COMPANIES PHICA

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTEORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608303, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN -LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. FSM Spa Trustee LI	<u>c</u>		
	(Name of Foreign Limited	Liability Company)	
2. Delaware (Jurisdiction under the company is organized	e law of which foreign limited liability	3. (FEI number, if applicable)	<u></u>
4. November 9, 2004 (Date)	of Organization)	5. 2079 (Duration: Year limited linkility company will exist or "perpensal")	cease to
6. upon qualification	(Date first managed the business in F (See sections 608.50) & 608.502 F.:	lorida, if prior to registration.) S. to determine penalty liability)	
7. c/o Millennium Parte	ners - 1995 Broadway		
New York, NY 100	23		04 DEC
	(Street Address	of Principal Office)	H
8. If limited liability	company is a manager-managed	i company, check here 🗷	
		naging members or managers are as follows:	2
TB Holding Co I LI			<u> </u>
c/o Millennium 1995 Broadway	ranthers		\$ 8
New York, N.Y.	10023		-
the jurisdiction under the translation of the certifical translation. Nature of businessing	law of which it is organized. (A photocop is under cath of the translator must be sub-	r promoted in Florida: Acting as trustee of a lan	inge, a
	A ALLES		I
	Signature of a member or an au (In accordance with section 608,408(3), F an affirmation under the penalties of peri Deborah Goldman	thorized representative of a member. S., the execution of this document constitutes my that the facts crained herein we crue.)	
FLM1_obstruct C T Research	Typed or printed	name of signee	

. Palling T. S. ... Sand Y. Sand Silvery (Parameters Sec.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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 of the Phillied Pathilly Compa	aly ta.					
FSM Spa Trustec LLC						
The name and the Florida street address o	f the registered :	igent and office are:				
CTC	Corporation System					
	(Name)					
1200 S	outh Pine Island Ro	æd				
Florida Street Addre	ess (P.O. Box NOT	ACCEPTABLE)				
Plantation	FL	33324				
	Ciry/State/Zip					
	M Spa Trustee LLC The name and the Florida street address o CT o	M Spa Trustee LLC The name and the Florida street address of the registered a C T Corporation System (Name) 1200 South Pine Island Ro Florida Street Address (P.O. Box NOT)				

Having been named as registered agent and to occept 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.

C T Corporation System

(Signature) Fill E. Kranz

Assistant Secretary

5 100.00 Filing Fee for Application

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

5 5.00 Certificate of Status (optional)

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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FSM SPA TRUSTEE 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 FIRST DAY OF DECEMBER, A.D. 2004.

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



Warriet Smith Hindson

3879320 8300

040861930

AUTHENTICATION: 3509969

DATE: 12-01-04