Florida Department of State

2005 JAN 27 P 12: 44

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Account Name : C T CORPORATION SYSTEM

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FOREIGN LIMITED LIABILITY COMPANY

Coral Partners GP, LLC

Certificate of Status	1
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION, FORIDA TRANSACT BUSINESS IN FLORIDA

Coral Parmers GP, LLC		
(Name of Foreign Lin		
Delaware		Not available
(Jurisdiction under the law of which foreign limited list company is organized)	oility	(FEI number, if applicable)
January 26, 2005	5.	2035
(Date of Organization)		(Duration: Year limited flability company will coast to exist or "perpetual")
Not applicable	•	Control of the Contro
(Date first transacted business (See sections 608,501 & 608.50	in Flor 12 F.S. (ids, if prior to registration.) o determine penalty liability)
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Raymond P. Sheley, Authorized Representative

Typed or printed name of signee

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1. The name of the Limited Lightlity Company is:

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

2005 JAN 27 P 12: 44 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

2. The name and the Florida stre	et address of the registered agent an	d office are;
	C T Corporation System	**
	(Name)	
•	1200 South Pine Island Road	•
Floric	s Street Address (P.O. Box NOT ACCEPTA	(BLE)
Plar	ntation FL 38 3	333 2 4
	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.

C T Corporation System

MARY R. ADAMS ASSISTANT SECRETARY

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

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* The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CORAL PARTNERS GP, 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 TWENTY-SIXTH DAY OF JANUARY, A.D. 2005.

Harriet Smith Windson, Secretary of State AUTHENTICATION: 3640554

DATE: 01-26-05

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