M05000001766

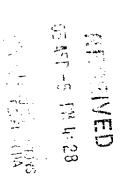
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	<u> </u>
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	s
Special Instructions to Filing Officer:	
1	

Office Use Only



600049774396







ACCOUNT NO. : 072100000032

REFERENCE

297253 4301763

AUTHORIZATION

COST LIMIT :

ORDER DATE: April 5, 2005

ORDER TIME : 2:58 PM

ORDER NO. : 297253-005

CUSTOMER NO: 4301763

CUSTOMER: Ms. Anna Cerda

Troutman Sanders Llp 405 Lexington Avenue The Chrysler Building New York, NY 10174

FOREIGN FILINGS

NAME: JAZ CAPITAL MANAGEMENT, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ___ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

	APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA	To Co	5 1	
	N COMPLIANCE WITH SECTION 608.503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FO IMITED LIABILITY COMPANY TO TRAINSACT BUSINESS IN THE STATE OF FLORIDA	REIGN 5	AMERICAN SERVICE	
1	Jaz Capital Management, LLC	03. 6	>	
(Name of Foreign Limited Liability Company)				
2	Delaware 3 20-2523426	7		
_	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		-	
4	November 15, 2004 5 Perpetual			
•	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")			
6	(Date first transacted business in Florida, if prior to registration.) (See sections 608 501 & 608 502 F S to determine penalty liability)			
7	405 Lexington Avenue, The Chrysler Building			
	New York, NY 10174			
	(Street Address of Principal Office)			
8	If limited liability company is a manager-managed company, check here			
9	The name and usual business addresses of the managing members or managers are as follows:			
	Martin Weisberg, Managing Member	-:		
	405 Lexington Avenue, The Chrysler Building			
	New York, NY 10174			
Ιπ	O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record purished in the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under outh of the translator must be submitted.)	ıds in	-	
11	Nature of business or purposes to be conducted or promoted in Florida: Any and all lawful			
	act or activities.		4	
	Mart Ei Weinber			
	Signature of a member or an authorized representative of a member (In accordance with section 608 408(3) F.S. the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Martin Weisherd			

Typed or printed 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 the Limit	ed Liability Compar	ıy is:		
Jaz Capital Managemer	it, LLC	- · · · · · · · · · · · · · · · · · · ·	_	<u> </u>
2. The name and the Flor	ida street address of	the registered agent	and office a	nte:
	Corporat	ion Service Compa	any	
		(Name)		
	1201 Hay	s Street		
	Florida Street Addres	SS (PO BOX NOT ACCE	PTABLE)	
	Tallahassee	FL 32301		
		City/State/Zip		
Having been named as reg liability company at the pla agent and agree to act in the relating to the proper and a obligations of my position of Corporation Service By:	nce designated in this his capacity I further complete performance as registered agent a e Company	certificate, I hereby a cagree to comply wit e of my duties, and I d	accept the aph the provise an familian opter 608, Fl	ppointment as registered ions of all statutes with and accept the

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

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JAZ CAPITAL MANAGEMENT, 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 FIFTH DAY OF APRIL, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JAZ CAPITAL MANAGEMENT, LLC" WAS FORMED ON THE FIFTEENTH DAY OF NOVEMBER, A.D. 2004.

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

Warriet Smith Windson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3789916

DATE: 04-05-05

3881244 8300

050274144