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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e#)
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TRANSMITTAL LETTER

	ation Sec n of Corp		-, -		٠	. "		•	
SUBJECT:	Zack	Family	Property	LLC	-		_		
_			(Name of Lir	nited Lia	bility Con	npany)			
Florida," Certif	ficate of l	Existence, a		ubmitted		or Authorization or the above refe			n .
Please return al	ll corresp	ondence co	oncerning this i	matter to	the follow	ring:			
			Nancy R	eynold	ls				
			(Na	ame of Pe	erson)				
	I	Reynolds	s & Associ	ates (CPAs, P	·.A		_	
	<u> </u>		(Fi	rm/Com	oany)				
	8	3955 Foi	ntana Del	Sol Wa	ay				
				(Addres	s)			_	
	1	Naples,	FL 34109						
			(City/S	tate and 2	Zip Code)	 	. با المسلم مالية ا		, mare State of the
For further info	rmation	concerning	this matter, pl	ease call:			100 100 100 100	TARY OF SEATE	
	Nancy	Reynold	đs	at (239	593-6006	ية ميا س	유 골	
	(1)	vame of Pe	rson)	(Āı	rea Code &	& Daytime Tele	ohone Numb	ers -	
Registra Division 409 E. (T ADDI ation Sec n of Corp Gaines St ssee, Flor	tion orations			Registrate Division P.O. Box	NG ADDRESS: tion Section of Corporations a 6327 see, Florida 323	S		
Enclosed is a cl	heck for t	the followi	ng amount:						

□ \$130.00 Filing Fee & □ \$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate
Certificate of Status Certified Copy

□ \$125.00 Filing Fee

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

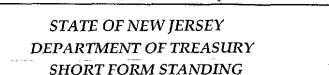
Zack F	amily Property LLC	
	(Name of Foreign Limite	ited Liability Company)
New Je	ersey	3. 22-3416370
(Jurisdiction under t company is organize	the law of which foreign limited liability ed)	lity (FEI number, if applicable)
12/5/1		5. Perpetual
(Date	e of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
3/23/2	· ·	
	(Date first transacted business in (See sections 608.501 & 608.502 F	in Florida, if prior to registration.) 2 F.S. to determine penalty liability)
557 De	evils Lane	•
Naples	s, FL 34103	-
	(Street Addre	lress of Principal Office)
If limited liabili	ty company is a manager-manage	ged company, check here
The name and u	sual business addresses of the ma	managing members or managers are as follows:
		Lane, Naples, FL 34103
	- Back, 337 Devils do	Jane, Napres, 11 34103
		· · · · · · · · · · · · · · · · · · ·
		rg P
		一 一
		n 90 days old, duly authenticated by the official having custody of récord ocopy is not acceptable. If the certificate is in a foreign language, a
	cate under oath of the translator must be su	
NY		
	ness or purposes to be conducted	
Any ar	nd all lawful business	s purposes /
	Signature of a member or an	n authorized representative of a member.
	(In accordance with section 608.408(3)	(3), F.S./the execution of this document constitutes
	an affirmation under the penalties of pe	(perjury that the facts stated herein are true.)
	John J. g	<u> </u>
	Typed or print	nted 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	Limited Liability Compar	ıy is:		
Za	ack Family Proper	ty LLC	, <u> </u>	<u> </u>
2. The name and th	e Florida street address of	the registered	agent and office are	e;
	John J.	Zack		
. 		(Name)		
	557 Dev:	ils Lane		
	Florida Street Addres	ss (P.O. Box NO	T ACCEPTABLE)	
	Naples	FL	34103	
		City/State/Zip		
liability company at a agent and agree to a relating to the prope	as registered agent and to a the place designated in this ct in this capacity. I furthed r and complete performanc sition as registered agent a	certificate, I h r agree to com e of my duties,	ereby accept the app ply with the provisio and I am familiar w	pointment as registered ns of all statutes ith and accept the
		<u>/</u>		
	(Signature)			SECULIARY OF SECULIARIES FOR
		Filing Fee for	Application of Registered Agent	EST B
		Designation of Certified Con-	•	

5.00 Certificate of Status (optional)



ZACK FAMILY PROPERTY, L.L.C.

0600023583

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on December 5, 1995.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Samuel R Hoffer 15 Roszel Rd Princeton, NJ 08540 0000

Continued on next page . . .

