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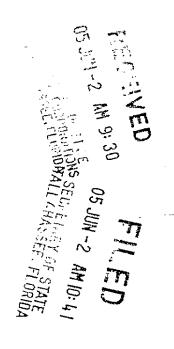
(Request	or's Name)
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PICK-UP	WAIT MAIL
(Business	s Entity Name)
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Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

(830) 224-8870 • 1-800-342-8002 • Fax (830) 222-1222	ALCO SELECTION OF THE PARTY OF
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	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
03/05 8:45	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier



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:

	(Name of For	eign Limited Liabil	ity Company)
Delaware		3, 20	D-2805716
	nder the law of which foreign lim ganized)	ited liability	(FEI number, if applicable)
May 4, 2005		5. P	erpetual
	(Date of Organization)		Duration: Year limited liability company will cease to exist or "perpetual")
	Date first transacted	vicinace in Florida	if prior to registration.)
	(See sections 608.501 &	608.502 F.S. to de	etermine penalty liability)
c/o Mark J. L	esser, 1101 Midland Avenue,	Broxville, NY 107	08
		74	
	70	treet Address of Pr	incinal Office\
	(0	acci Addiess of Tr	meipai Office)
If limited lia	ability company is a manage	r-managed com	pany check here //
	activity company to a manage	A-managed com	party, encor here [4]
	_		
	_		g members or managers are as follows:
The name a	_	of the managing	g members or managers are as follows:
The name a	nd usual business addresses	of the managing	g members or managers are as follows:
The name a	nd usual business addresses	of the managing	g members or managers are as follows:
The name a	nd usual business addresses	of the managing	g members or managers are as follows:
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The name a LH Collins E	nd usual business addresses Development, LLC, a New York Original certificate of existence, no	of the managing alimited liability of the managing and th	g members or managers are as follows: ompany ld, duly authenticated by the official having custody of re
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The name a LH Collins D Attached is an ejurisdiction und	original certificate of existence, noder the law of which it is organized entificate under oath of the translato ousiness or purposes to be considered to be co	more than 90 days of (A photocopy is normust be submitted on ducted or producted or producted or producted of producted of producted or	g members or managers are as follows: company ld, duly authenticated by the official having custody of restacceptable. If the certificate is in a foreign language, a moted in Florida: Real Estate Holding zed representative of a member.

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.

Centuria	n Collins Avenue, LLC		er, Naga pr
2. The r	name and the Florida street add	ress of the registered agent and office are:	
	Craig M. Dorne, PA	A CONTRACT OF A	ag valet – a. liiti
		(Name)	
	407 Lincoln Road, Penth	iouse Southeast	+4-4
	Florida Street	t Address (P.O. Box NOT ACCEPTABLE)	
	Miami Beach	.FL 33139	والمراق والمسا
		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.

(Signature)

\$ 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 "CENTURIAN COLLINS AVENUE, 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 THIRTY-FIRST DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTURIAN COLLINS AVENUE, LLC" WAS FORMED ON THE FOURTH DAY OF MAY, A.D. 2005.

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

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 3913486

DATE: 05-31-05

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