

M 05000003231

(Requestor's Name)

(Address)

(Address)

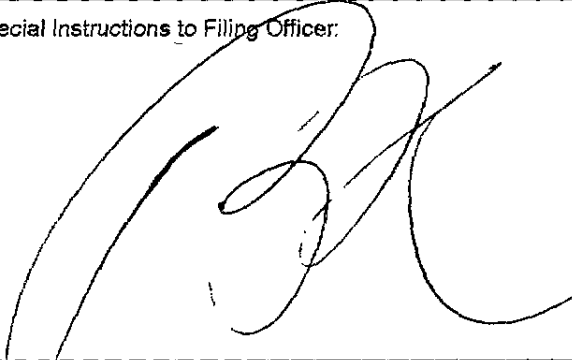
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

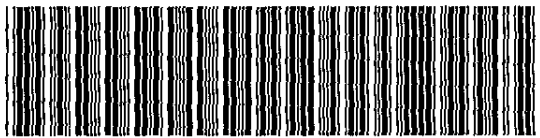
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
05 JUN 15 PM 12:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA FILING & SEARCH SERVICES, INC.
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PHONE: (800) 435-9371 FAX: (866) 860-8395

DATE: 06-15-05

NAME: FLAGLER-HUDSON, LLC

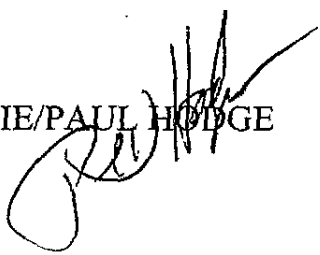
TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST: \$125 + \$330 = \$155 + 5.00 = \$160

RETURN: CERTIFIED COPY *and Good Standing*

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



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

FILED
05 JUN 15 PM 12:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Foreign Limited Liability Company:

FLAGLER-HUDSON, LLC

2. Jurisdiction of its organization: Delaware

3. FEI Number: 20-2993632

4. Date of Organization: June 9, 2005

5. Duration: Until dissolved

6. Date first transacted business in Florida: Upon qualification

7. Street Address of Principal Office:

4218 N.E. 2nd Ave., 2nd Floor

Miami, FL 33137

8. If limited liability company is a manager-managed company, check here

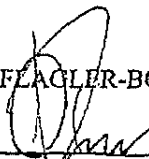
9. The name and usual business address of the Manager is as follows:

Flagler-Boulevard, Inc., 4218 N.E. 2nd Ave., 2nd Floor, Miami, FL 33137

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized.

11. Nature of business or purposes to be conducted or promoted in Florida: Any and all lawful business

By: FLAGLER-BOULEVARD, INC

By: 
Signature of a member or the authorized
representative of a member

John Petersen, Secretary of Manager and Authorized Representative of the Members

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 Limited Liability Company is:

FLAGLER-HUDSON, LLC

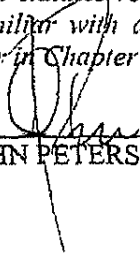
2. The name and the Florida street address of the registered agent and office are:

JOHN PETERSEN

4218 N.E. 2nd Ave., 2nd Floor

Miami, FL 33137

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.



JOHN PETERSEN

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLAGLER-HUDSON, 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 TENTH DAY OF JUNE, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLAGLER-HUDSON, LLC" WAS FORMED ON THE NINTH DAY OF JUNE, A.D. 2005.

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

3983109 8300

050486579



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3941395

DATE: 06-10-05