

MU5000004139

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

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05 JUL 25 AM 8:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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05 JUL 25 PM 4:49  
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TALLAHASSEE, FLORIDA

CORPDIPECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

FILED  
05 JUL 25 AM 8:11  
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TALLAHASSEE, FLORIDA

CONTACT: ED

DATE: 07/25/05

REF. #: 0150.40464

CORP. NAME: LG CITYMARK, LLC

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION        | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT                    | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME         |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT                    | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION      |   |  |
| <input type="checkbox"/> OTHER:                           |   |  |

STATE FEES PREPAID WITH CHECK# 513539 FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |  |   |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

**FILED**  
05 JUL 25 AM 8:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 26, 2005

CORPDIRECT AGENTS

TALLAHASSEE, FL

SUBJECT: LG CITYMARK, LLC  
Ref. Number: W05000035291

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.

We have received your document for LG CITYMARK, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$160.00 payment.

In Item 9, you must list both the NAME and the ADDRESS of the MANAGER.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr  
Document Specialist

Letter Number: 205A00048523

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.


**RECEIVED**  
05 JUL 26 PM 3:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**FILED**  
05 JUL 25 AM 8:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the limited liability company is **LG CITYMARK, LLC** ("Company")
2. Jurisdiction under the law of which the Company is organized is Delaware.
3. The FEI number is applied for.
4. Date of organization is July 25, 2005
5. Duration is perpetual.
6. Date first transacted business in Florida: Upon filing of this registration of foreign limited liability company.
7. The street address of the Company's principal office is 429 Lenox Avenue, Suite 5W05, Miami Beach, Florida 33139.
8. The Company is a manager-managed company.
9. The business address of the manager is 429 Lenox Avenue, Suite 5W05, Miami Beach, Florida 33139. The manager is LG Capital Partners, LLC.
10. *Attached is an original certificate of existence, no more than ninety (90) days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which the Company is organized.*
11. Nature of business or purposes to be conducted or promoted in Florida: the transaction of any lawful business.

**LG CITYMARK, LLC**, a Delaware  
limited liability company

By:   
Print Name: Scott A. Osman  
Title: Vice President

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

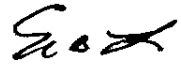
*PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.*

1. The name of the limited liability company is **LG CITYMARK, LLC**
2. The name and Florida street address of the registered agent and office are:

CorpDirect Agents, Inc.  
103 N. Meridian Street  
Lower Level  
Tallahassee, Florida 32301

*Having been named as registered agent and to accept service of process for the above named  
limited liability company at the place designated in this certificate, the undersigned hereby  
accepts the appointment as registered agent and agrees to act in this capacity. The undersigned  
further agrees to comply with the provisions of all statutes relating to the proper and complete  
performance of its duties, and the undersigned is familiar with and accepts the obligations of its  
position as registered agent as provided for in Chapter 608, F.S.*

**CORPDIRECT AGENTS, INC.**

By:   
Print  
Name: Ed R. Lary  
Title: Assistant Secretary

# Delaware

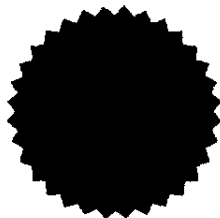
PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LG CITYMARK, 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-FIFTH DAY OF JULY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LG CITYMARK, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF JULY, A.D. 2005.

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



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

4004542 8300

AUTHENTICATION: 4043607

050610536

DATE: 07-25-05