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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	<i>-</i>
SUBJECT: 8th Street Miami, LLC	
(Name of Limited Liability Company)	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida	
Please return all correspondence concerning this matter to the following:	
Jay D. Robinson, Jr.	-
(Name of Person)	,
Scopelitis, Garvin, Light & Hanson, PC	
(Firm/Company)	
10 W. Market Street, Suite 1500	
(Address)	
Indianapolis, IN 46204-2968	
(City/State and Zip Code)	. =1
For further information concerning this matter, please call:	
Jay D. Robinson, Jr. at (317) 637-1777	= -
(Name of Person) (Area Code & Daytime Telephone Number)	
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines Street  Tallahassee, Florida 32399  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, Florida 32314	· · · · <del>· ·</del>
Enclosed is a check for the following amount:	

□ \$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:

(Tunio of Foldigit Elimet	d Lia	bility Company)
Delaware	. 2	20-3430633
(Jurisdiction under the law of which foreign limited liability company is organized)	<i>y</i> .	( FEI number, if applicable)
August 31, 2005	.5.	perpetual
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
and the second s		A STATE OF THE STA
(Date first transacted business in (See sections 608.501 & 608.502 F	Flor S. t	da, if prior to registration.) o determine penalty liability)
502 East Bridgers Avenue		
Auburndale, FL 33823		
	SS O	Principal Office)
The name and usual business addresses of the ma	anag	ging members or managers are as follows:
Robert Fox, 502 East Bridgers Avenue, Auburndale,	=	
	, FL	33823
Robert Fox, 502 East Bridgers Avenue, Auburndale,	FL nda 00 da	33823  le, FL 33823  ys old, duly authenticated by the official brings custody of receive to the certificate is in a foreign language, a
Robert Fox, 502 East Bridgers Avenue, Auburndale, Richard Straughn, 502 East Bridgers Avenue, Aubur  Attached is an original certificate of existence, no more than 9 in pricing a pricing and a prici	FL nda 0 da opy	ys old, duly authenticated by the official broining custody of red is not acceptable. If the certificate is in a foreign language, a tted.)
Robert Fox, 502 East Bridgers Avenue, Auburndale, Richard Straughn, 502 East Bridgers Avenue, Aubur  Attached is an original certificate of existence, no more than 9 in prictical original certificate of the translator must be supplied to the certificate under oath of the translator must be supplied to the certificate under oath of the translator must be supplied to the translator must be supplied t	FL nda 0 da opy	ys old, duly authenticated by the official baving custody of red is not acceptable. If the certificate is in a foreign language, a tted)  Promoted in Florida: Real Estate Holding Company
Richard Straughn, 502 East Bridgers Avenue, Auburndale, Richard Straughn, 502 East Bridgers Avenue, Aubur  Attached is an original certificate of existence, no more than 9 equisidiction under the law of which it is organized. (A photoenslation of the certificate under oath of the translator must be sure.)  Nature of business or purposes to be conducted.  Signature of a member or an account of the translator must be sure.	FL rnda	ie, FL 33823  ys old, duly authenticated by the official larging custody of red is not acceptable. If the certificate is in a foreign language, a tted.)  Beal Estate Holding Odmpany  orized representative of a member.  the execution of this document constitutes

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	y is:		
8th Street Mia	mi, LLC	<u> </u>	<u> </u>	
2. The name	and the Florida street address of	the registered agent and office are:		
	Corporation Service Company		·	. <u> </u>
		(Name)		
	1201 Hays Street	and the second s	<del>2</del> ·	
	Florida Street Address	s (P.O. Box NOT ACCEPTABLE)		-
	Tallahaasaa	00001		
	Tallahassee	FL 32301 City/State/Zip	<del></del>	100 mm

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.

Corporation Service Company

By: (Signature)

Vera Norris, Authorized Representative

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

## Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "8TH STREET MIAMI, 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 NINETEENTH DAY OF SEPTEMBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "8TH STREET MIAMI, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF AUGUST, A.D. 2005.

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

SECRETARY OF STATE



Darriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4164823

DATE: 09-19-05

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