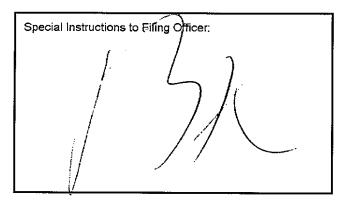
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(Requestor	's Name)
(Address)	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business E	Entity Name)
(Document	Number)
Certified Copies C	ertificates of Status



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RECEIVED

95 0CT 31 PH 12: 47



ACCOUNT NO. : 072100000032

REFERENCE : 678200 4346135

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE: October 28, 2005

ORDER TIME : 9:39 AM

ORDER NO. : 678200-040

CUSTOMER NO: 4346135

#### FOREIGN FILINGS

NAME: TRU 2005 RE I, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Denise Mick -- EXT# 2950

EXAMINER:

### 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:

TRU 2005 RE I, LLC			17 SE 95
(Name of Foreign Limited	d Lia	bility Company)	
Delaware	3.	04-3829292	31
(Jurisdiction under the law of which foreign limited liability company is organized)	у .	( FEI number, if	applicable Tier
09/15/2005	5.	Perpetual	五02 13
(Date of Organization)		(Duration: Year limited liabil exist or "perpetual")	ity company will rease to
(Date first transacted business in (See sections 608.501 & 608.502 F	Flori	da, if prior to registration.) o determine penalty liability)	· · · · · · · · · · · · · · · · · · ·
One Geoffrey Way		المراجعة الم	
Wayne, NJ 07470			
(Street Addre	ess of	Principal Office)	
The name and usual business addresses of the ma	anag	ging members or managers	are as follows:
One Geoffrey Way			
Wayne, NJ 07470			
O. Attached is an original certificate of existence, no more than 9 ne jurisdiction under the law of which it is organized. (A photocranslation of the certificate under oath of the translator must be st	copy	is not acceptable. If the certificate	
1. Nature of business or purposes to be conducted	l or j	promoted in Florida:	
Holder of Real Property			
	$\geq$	·	
Signature of a member or an (In accordance with section 608.408(3) an affirmation under the penalties of p	), F.S	., the execution of this document co	onstitutes
David M. Kastin			

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

TRU 2005 RE	I, LLC	
2. The name	and the Florida street address of the registered agent and office are:	
	Corporation Service Company	
	(Name)	
	1201 Hays Street	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee FL 32301	
	City/State/Zip	

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 (Signature)

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

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRU 2005 RE I, 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-EIGHTH DAY OF OCTOBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRU 2005 RE

I, LLC" WAS FORMED ON THE FIFTEENTH DAY OF SEPTEMBER, 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: 4260824

DATE: 10-28-05