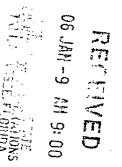
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(Requestor's Name)	_
(Address)	
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
Office Use Only	



900062430849

SECTION AND PROPERTY.





ACCOUNT NO. : 072100000032

REFERENCE

7198048

AUTHORIZATION (

COST LIMIT

ORDER DATE: January 4, 2006

ORDER TIME : 3:35 PM

ORDER NO. : 794234-005

CUSTOMER NO: 7198048

FOREIGN FILINGS

NAME: INLET HARBOR PARTNERS LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

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:

(Name of Fo	oreign Limited Lia	bility Company)		جے
Delaware	2			
(Jurisdiction under the law of which foreign li company is organized)	mited liability 3.	(FEI numb	er, if applicable)	高星
July 26, 2004	5.	perpetual	7	SE SO
(Date of Organization)		(Duration: Year limited exist or "perpetual")	liability company w	ill cease to
n/a		:		95
(Date first transacted (See sections 608.501	d business in Florid & 608.502 F.S. to	da, if prior to registration. determine penalty liabili	у)	- 5 ₇ A
c/o Multi Capital Group, One Chase Manhat	tan Plaza, 34th Flo	or, New York New York	10005	
			·	
	(Street Address of	Principal Office)		
701' ', 11' 1'T'.			7	
If limited liability company is a mana	ger-managed co	ompany, check here		
The name and usual business addresse	es of the manage	ing members or mana	gere are as follow	70 <i>*</i>
The mane and about openings address.	or or the munag	me montoers or mana	2012 at c as 10110 M	, a.
Eli Verschleiser c/o Multi Capital Group, O	ne Chase Manhatt	an Plaza, 34th Floor, New	York New York 100	005
	<u> </u>	e ", andria na e		
•			<u> </u>	
). Attached is an original certificate of existence, n				
e jurisdiction under the law of which it is organize			icate is in a foreign la	nguage, a
anslation of the certificate under oath of the transla	tor must be submitt	ed.)		
1 Nation Charles	1 1		eal estate developme	ent .
1. Nature of business or purposes to be	conducted or pr	romoted in Florida; _	our courte de votopane	
		· *	1	
	Andrew Control of the	resident to the second	· · · · · · · · · · · · · · · · · · ·	*
<u> Agric</u>				
Signature of a men	ber or an author	ized representative of	member.	
(In accordance with section	on 608.408(3), F.S., tl	ne execution of this document	constitute s	
	penalties of perjury th	at the facts stated herein are tr	ue)	
Eli Verschleiser				
	ed or printed nar			

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	of the Limited Liability C	Company is:			
Inlet Harbor Par	tners, LLC	<u> </u>	<u></u>		
2. The name a	and the Florida street add	ress of the registered agent and office are:			
	Corporation Service Comp	pany			
		(Name)			
	1201 Hays Street	<u> </u>			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee	FL 32301			
		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.

Corporation Service Company

By:

Signaturer

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INLET HARBOR PARTNERS 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 FIFTH DAY OF JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INLET HARBOR PARTNERS LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF JULY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



3833341 8300 -

Warriet Smith Windson
Harriet Smith Windson, Secretary of State

arriet Smith Windsor, Secretary of State

AUTHENTICATION: 4424521

060009696 DATE: 01-05-06