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FEORIDA/FOREIGN LIMITED LIABILITY CO.

Vikor 26 Operating, LLC

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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:

Deleware (Jurisdiction under the law of which foreign limited liability company to organized) February 22, 2006 (Date of Organization) Upon Filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1101 Brickell Avenue, Suite 1005 South Miami, Florida 33131 (Street address of principal office) If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows: Sheldon Guren, 1101 Brickell Avneue, Suite 1005 South, Miami, FL 33131 O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official hastody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If a trificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted. Nature of business or purposes to be conducted or promoted in Florida; Including but not limited to acquisition and development of real estate Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), FS., the execution of this document constitutes an affirmation under the penalties of populy that the facts state the		(Name of foreign limited liability
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an armitmation under the penalties of perjury that the facts stated herein are true.)	(In secondance wit	th section 608,404(3), F.S., the execution of this document constitutes
\mathbf{cor}	an sitirmation und	der the penalties of perjuty that the facts stated herein are true.)

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	e Limited Liability Con	mpany is:	•	
Vikor 26 Operating, I	ıc			
2. The name and	the Florida street addre	u of the registere	i agent and office are;	
		CT Corporation Syste		_
	•	(Name)		_
_	12	00 South Pine Island	Rosd	_
	Plorida street s	iddress (P.O. Box <u>NC</u>	T ACCEPTABLE)	
_	Plantation	FL	33324	_
•	_	(City/State/Zip)	•	
liability company o agent and agree to relating to the proj	at the place designated act in this capacity. If our and complete perfole cosition as registered a	in this certificate, further agree to co rmance of my duti	ce of process for the abov. I hereby accept the appol mply with the provisions e es, and I can familiar with or in Chapter 608, Florid	niment as registered of all stances and accept the
	(Signature)		ra a edner Boldat belightliket	
	\$ 100.0 \$ 25.0 \$ 30.0	0 Designation 0 Certified Co	r Application of Registered Agent py (optional)	SECR: TALLAH

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Delaware

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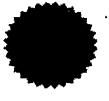
The First State

I, HARRIET SMITE WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VIKOR 26 OPERATING, 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-THIRD DAY OF FEBRUARY, A.D. 2006.

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

SECRETAKE OF STATE TALLAHASSEE, FLORIDA

06 APR 10 AM 7: 56



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Warnet Smile Hindan Harrier Smith Windson Secretary of State

AUTHENTICATION: 4543248

DATE: 02-23-06