

M06000002374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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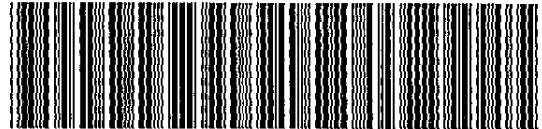
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 APR 28 PM 1:03

DIVISION OF CORPORATION

4/28
[Signature]



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 071260 5164717

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE : April 28, 2006

ORDER TIME : 11:43 AM

ORDER NO. : 071260-005

CUSTOMER NO: 5164717

FOREIGN FILINGS

NAME: FAIRHOLME CAPITAL MANAGEMENT,
L.L.C.

XX LLC

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER: _____

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

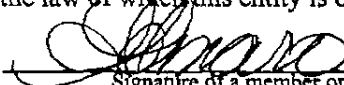
SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: Fairholme Capital Management, L.L.C.
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: April 26, 2006

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SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? _____
5. New name of the limited liability company: _____
6. If the amendment changes the period of duration, indicate new period of duration: _____
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: Name and Usual Business Address of Managing Member: Bruce Berkowitz,
1001 Brickell Bay Drive, #3112, Miami, Florida 33131
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of a member or the authorized
representative of a member

Mory Amaro

Typed or printed name of signee

Filing Fee: \$25.00