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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	<u></u>
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Office Use Only



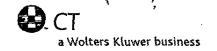
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D DEPARTURAL OF STATE

2: 18 CROS OCT 11 AM III:



1203 Governors Square Blvd. Tallahassee, FL 32301-2960

850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

October 11, 2006

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

ARCATE AND ARCA STATE OF THE PARTY OF THE PA

Re:

Order #: 6753631 SO

Customer Reference 1: 515542-00001

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

CRO Development GP, L.L.C. (DE) Registration Florida



Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	SECTION 608.503, FLORIDA ANY TO TRANSACT BUSINE				1.5 % A
CRO Development GP,	, L.L.C.			•	200 G
	(Name of Foreign	Limited Lia	ability Company)		75/20
Delaware		3.	65-1260099		357
(Jurisdiction under the lacompany is organized)	aw of which foreign limited	liability	(FE	I number, if applicable	ACCOUNTY OF THE PORT OF THE PO
01/27/2005		5.	Perpetual		
(Date of	Organization)		(Duration: Year exist or "perpetu	limited liability compa al")	ny will cease to
	(Date first transacted busi (See sections 608,501 & 60	ness in Flor	ida, if prior to regis	tration.)	
	(See sections odomor se of	70,30£ 1°,0, b	o determine penancy	maomey)	
·					
12200 Stemmone From	way, Suite 100, Dallas, TX	75234			
12200 Significant Freet			f Principal Office)		
	(aut				
If limited liability of	company is a manager-	managed c	ompany, check	nere 🗵	
		_			
The name and usua	il business addresses of	the manag	ging members or	managers are as fo	llows:
	10000 0	n v. 100 m	777 75004		
John D. Harkey, Jr., I	2200 Stemmons Freeway,	Suite (00, D	alias, 1 X /3234		
Gene Street 12200 St	emmons Freeway, Suite 100	n Dallae TX	c 75934		
Gene Street, 12200 30	Emmons riceway, bare ro	3, Daime, 12	L 1040+		
	<u> </u>				
	al certificate of existence,				
	jurisdiction under the law				
in a foreign language	e, a translation of the c	ertificate u	ander oath of the	translator must be	submitted.)
i. Nature of business	s or purposes to be con-	ducted or p	promoted in Flor	ida: Act as general p	armer
for a limited partnershi	in.				
marriage particular	<u> </u>	$\overline{}$			
	\sim				
•	Signature of a rhember	o an auti	norized represen	tative of a member.	
	(In accordance with section 6	08.4 9 8(3), F.S	., the execution of thi	s document constitutes	
	an affirmation under the pena		y that the facts stated	herein are true.)	
	John D. Harkey, Jr., manag				
	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 t	he Limited Liability Compar	ny is:
CRO Deve	Lopment GP, L.L.C.	
2. The name and	the Florida street address of	the registered agent and office are:
	CT Corporat	ion System
		(Name)
·		Pine Island Road ss (P.O. Box NOT ACCEPTABLE)
	Pioritia Street audio	os (1.0. bux 1101 Accer (Abel)
_	Plantation	FL 33324
-	(Cit	y/State/Zip)
liability company registered agent o statutes relating t	at the place designated in th and agree to act in this capac to the proper and complete pe	accept service of process for the above stated limited is certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S.
Connie Bryan,	(Signature) Special Asst. Secy.	
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRO DEVELOPMENT GP, L.L.C." 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 NINTH DAY OF OCTOBER, A.D. 2006.

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



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5099837

DATE: 10-09-06

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060925311