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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

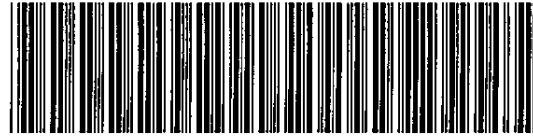
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 OCT 16 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**JONES
FOSTER
JOHNSTON
& STUBBS, P.A.**
Attorneys and Counselors

Flagler Center Tower, Suite 1100
505 South Flagler Drive
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Dominique A. Payton, CLAS
Direct Dial: (561) 650-0427
Direct Fax: (561) 650-0485
E-Mail: dpayton@jones-foster.com

October 13, 2006

DELIVERED BY FEDERAL EXPRESS

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Trinity PB Venture LLC

Dear Madam/Sir:

Enclosed are the following requisite documents with respect to the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for the above named entity:

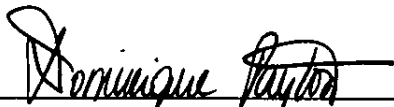
1. Cover letter;
2. Duly completed and executed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
3. Original Certificate of Good Standing for Trinity PB Venture LLC issued by the State of Delaware dated October 6, 2006; and
4. Firm check in the amount of \$160.00 to cover registration fees.

We look forward to your return letter of acknowledgment and confirmation of registration.

Sincerely yours,

JONES, FOSTER, JOHNSTON & STUBBS, P.A.

By



Dominique A. Payton, CLAS
Corporate & Business Law Specialist

Enclosure

cc: Larry B. Alexander, Esq.
P:\docs\24082\00004\LTR\10S5902.DOC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRINITY PB VENTURE LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

LARRY B. ALEXANDER
(Name of Person)

JONES FOSTER SERVICE, LLC
(Firm/Company)

505 SOUTH FLAGLER DRIVE, SUITE 1100
(Address)

WEST PALM BEACH, FL
(City/State and Zip Code)

For further information concerning this matter, please call:

LARRY B. ALEXANDER at (561) 659-3000
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA*

1. TRINITY PB VENTURE LLC

(Name of Foreign Limited Liability Company)

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability
company is organized)

3. 20-4559169

(FEI number, if applicable)

4. 02/14/2006

(Date of Organization)

5. PERPETUAL

(Duration: Year limited liability company will cease to
exist or "perpetual")

6. NO PRIOR BUSINESS TRANSACTIONS

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 201 WEST 52ND STREET, 3RD FLOOR

NEW YORK, NY 10019

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

FIRST TRINITY PB VENTURE LLC

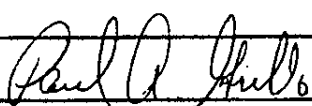
201 WEST 52ND STREET, 3RD FLOOR

NEW YORK, NY 10019

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: _____

INVESTMENT


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes
an affirmation under the penalties of perjury that the facts stated herein are true.)

PAUL A. GRILLO

Typed or printed name of signee

FILED
06 OCT 16 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 Limited Liability Company is:

TRINITY PB VENTURE LLC

2. The name and the Florida street address of the registered agent and office are:

JONES FOSTER SERVICE, LLC

(Name)

505 SOUTH FLAGLER DRIVE, SUITE 1100

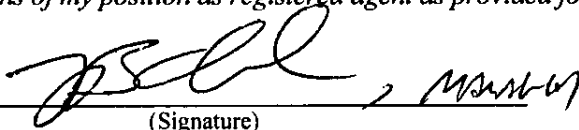
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

WEST PALM BEACH, FL 33401

City/State/Zip

FILED
06 OCT 16 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.



(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	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 "TRINITY PB VENTURE 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 SIXTH DAY OF OCTOBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRINITY PB VENTURE LLC" WAS FORMED ON THE FOURTEENTH DAY OF FEBRUARY, A.D. 2006.

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



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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5098117

DATE: 10-06-06