MO7000000524

| (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



700082992507



| ACCOONT NO 072100000032 |
|---|
| REFERENCE : 732206 7519989 |
| AUTHORIZATION: Spelledene |
| COST LIMIT : \$ 160.00 |
| ORDER DATE : January 29, 2007 |
| ORDER TIME: 8:00 AM |
| ORDER NO. : 732206-005 |
| CUSTOMER NO: 7519989 |
| FOREIGN FILINGS NAME: SPRING WAVE PROPERTIES, LLC |
| XXXX QUALIFICATION (TYPE: LL) |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| CERTIFIED COPY PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING |
| CONTACT PERSON: Kathy Drake EXT# 2959 |
| 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: Properties, l (Name of Foreign Limited Liability Company) (FEI number, if applicable 10 06 (Date of Organization) Duration: Year limited liability company will cease (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) (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: 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: 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) Schnelden

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.

| 2. The name and the Florida street address of the registered agent and office are: | |
|--|--|
| Alschneider | |
| (Name) | |
| 11745 Royal Palm Blud | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| Coral Springs, FL 33065 | |
| 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.

(Signature)

1. The name of the Limited Liability Company is:

Soring Wave Properties, LLC

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

State of New York Department of State } ss:

I hereby certify, that SPRING WAVE PROPERTIES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/10/2006, and that the Limited Liability Company is existing so far as shown by the records of the Department.



Witness my hand and the official seal of the Department of State at the City of Albany, this 25th day of January two thousand and seven.

Daniel Shapiro

Special Deputy Secretary of State

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