mo 7000000921

(Reque	estor's Name)
(Addre	ess)
(Addre	ess)
(City/S	state/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busin	ess Entity Name)
(=	,
Фоси	ment Number)
(5001)	and the state of t
Constitut Contra	Certificates of Status
Certined Copies	Cerunicates of Status
Special Instructions to Fili	ng Officer;
	/ms t

Office Use Only



200087387402

02/03/07--01032--024 **165.00

2001 FEB -9 P 1: 22
SECRETARY OF STATE
ALLAHASSEFF FINALE

SEEGEL LIPSHUTZ & WILCHINS, P.C. ATTORNEYS AT LAW

RICHARD L. SEEGEL
DAVID M. LIPSHUTZ*
STEPHEN N. WILCHINS
MICHAEL B. COSENTINO**+
DON J.J. CORDELL
JEFFREY P. ALLEN
WILLIAM A. DEVASHER, JR.**
SHERMAN H. STARR, JR.
SUSAN DONALDSON NOVINS
LINDA A. OUELLETTE

MOLLY COCHRAN
IMELDA MONAGHAN
ERIC B. GOLDBERG
PATRICIA KEANE MARTIN
LANA SULLIVAN++**
JENNIFER LO***
NICHOLAS G. KERAMARIS

OF COUNSEL ERIC B. BRENMAN

February 8, 2007

Federal Express Overnight Airbill No. 8565 5587 7740

Florida Department of State Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 2001 FEB -9 P 1: 22
SECRETARY OF STATE

Re: Ponn Florida LLC

Dear Sir/Madam:

We have enclosed herein for your review and further action, the following documents as they relate to the above-named LLC:

- 1. Two original Applications by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
- 2. Two copies of the Certificate of Designation of Registered Agent/Registered Office;
- One original certified copy of the Certificate of Formation of Ponn Florida LLC, issued by the Delaware Secretary of State on February 6, 2007;
- 4. Check for \$165.00 (application filing fee, designation of registered agent fee, certified copy fee and 2 certificates of status fee); and
- 5. Self-addressed, stamped overnight envelope.

The certified copy of the application filing and certificate of status are required for a closing scheduled for February 14, 2007. As such, we would very much appreciate it if you would kindly process the enclosed in an expedited manner and forward the certified copy and certificates of status

WELLESLEY OFFICE PARK, 20 WILLIAM STREET, SUITE 130, WELLESLEY, MASSACHUSETTS 02481-3803 TELEPHONE: 781.237.4400 FACSIMILE: 781.235.2333 WEBSITE: WWW.SLWPC.COM Florida Department of State Division of Corporations Registration Section February 8, 2007 Page 2 of 2

to us in the overnight envelope provided for your convenience.

Thank you for your attention to this matter. If you have any questions or further requirements, please do not hesitate to call us.

Very truly yours,

Stephen N. Wilchins

Enclosures

/vjt

4- j. -- ,

302711.1.0131020.3000

1001 FEB -9 P 1: 22
SECRETARY OF STATE

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:

Ponn Florida LLC				
(Name of Foreign I	Limited Liability Company)			
Delaware	3			
furisdiction under the law of which foreign limited li ompany is organized)	ch foreign limited liability (FEI number, if applicable)			
February 6, 2007	5. Perpetual			
(Date of Organization)	(Duration: Year exist or "perpetu		ity company will	cease to
February 6, 2007			286 SEL	
(Date first transacted busin (See sections 608.501 & 608	ess in Florida, if prior to regis .502 F.S. to determine penalty	tration.) y liability)	AHA.	77
20 William Street, Suite 130, Wellesley, I	WA 02481		B-G ARY SSE	
			En D	m
(Street	Address of Principal Office)			-0
If limited liability company is a manager-m	anaged company, check	here X	22 IDA	
	• • • • • • • • • • • • • • • • • • • •		6. 11	
The name and usual business addresses of t	ne managing members of	r managers	are as ionows:	•
Ponn Family LLC, 20 William Street, Suite	e 130, Wellesley, MA 024	481		
Attached is an original certificate of existence, no mon jurisdiction under the law of which it is organized. (Austation of the certificate under oath of the translator mu	photocopy is not acceptable. If			
. Nature of business or purposes to be cond	ucted or promoted in Flo	rida: Rea	l estate owners	hip and
management and all other activities permitte	ed by law			^
(In accordance with section 60) an affirmation under the penalt Stephen N. Wilco	hins	nis document co	onstitutes	
Tymed or	r 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.

Ponn Flor	rida LLC				
2. The name	and the Florida street ad	dress of the registered	agent and office ar	₹.	
		S. Degree			
(Name)			FEB RETA WHAS	******	
155 Office Plaza, Suite A				∃B -9 TARY C ASSEE,	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			TES: D		
	Tallahasse	FL	32301	1: 22 TATE ORIDA	
		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.

Delanie Case, asst. see. (Signature)

1. The name of the Limited Liability Company is:

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



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "PONN FLORIDA LLC", FILED IN THIS OFFICE ON THE SIXTH DAY OF FEBRUARY, A.D. 2007, AT 2:26 O'CLOCK P.M.

THE STATE OF THE S

4297387 8100

070131805

Warriet Smith Hinden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5413047

DATE: 02-06-07

State of Delaware
Secretary of State
Division of Corporations
Delivered 02:26 PM 02/06/2007
FILED 02:26 PM 02/06/2007
SRV 070131805 - 4297387 FILE

Certificate of Formation

PONN FLORIDA LLC

The undersigned, an authorized natural person, in order to form a limited liability company pursuant to the Delaware Limited Liability Company Act, 6 Delaware Code § 18-101 et seq. (the "Act"), certifies as follows:

- 1. Name of the Limited Liability Company: The name of the limited liability company is Ponn Florida LLC (the "Company").
- Registered Office: The Company's registered office required pursuant to §18-104 of the Act is: Capitol Services, Inc., 615 South DuPont Highway, Dover, County of Kent, Delaware 19901.
- 3. Registered Agent for Service of Process: The registered agent for service of process on the Company required pursuant to §18-104 of the Act is: Capitol Services, Inc., 615 South DuPont Highway, Dover, County of Kent, Delaware 19901.

In witness whereof, the undersigned has executed this Certificate of Formation as of this 6th day of February 2007.

302557.1.2012