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REFERENCE :

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE: March 29, 2007

ORDER TIME : 11:20 AM

ORDER NO. : 826853-010

CUSTOMER NO: 4311639

FOREIGN FILINGS

NAME: MSKP TOWN AND COUNTRY UTILITY

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ___ CERTIFIED COPY ____ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER: ____



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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:

MSKP Town and Country Utility LLC	n Limited Liability Company)
(Name of Folgo	• •
Delaware	3. Applied For
(Jurisdiction under the law of which foreign limited company is organized)	d liability (FEI number, if applicable)
March 21, 2007	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
Upon Qualification	
(Date first transacted bus	siness in Florida, if prior to registration.) 108,502 F.S. to determine penalty liability)
9055 Ibis Boulevard, West Palm Beach, Florid	da 33412
(Stre	eet Address of Principal Office)
. If limited liability company is a manager-	managed company check here
If mined hadniy company is a manager-	-managed company, once made
The name and usual business addresses o	of the managing members or managers are as follows:
MSKP Babcock Holdings, L.L.C., Member	
c/o Kitson & Partners, 9055 Ibis Boulevard	
West Palm Beach, FL 33412	
	core than 90 days old, duly authenticated by the official having custody of rec (A photocopy is not acceptable. If the certificate is in a foreign language, a must be submitted.)
1. Nature of business or purposes to be con	nducted or promoted in Florida:
Any lawful business permitted by the laws of	the State of Florida.
MSKP Babback Hold	ings, L.L.C., Member
	or an authorized representative of a member.
	608.408(3), F.S., the execution of this document constitutes nalties of perjury that the facts stated herein are true.)
· · · · · · · · · · · · · · · · · · ·	Authorized representative of a member
	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.

	and Country Utility LLC	ompany is:	
2. The nam	e and the Florida street addr	ess of the registered agent and office	ce are:
	Corporation Service Com	pany	
		(Name)	
	1201 Hays Street		
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	
		City/State/Zip	
liability com agent and ag relating to th obligations o	pany at the place designated gree to act in this capacity. I he proper and complete perfo	and to accept service of process for the in this certificate, I hereby accept the further agree to comply with the programmer of my duties, and I am familingent as provided for in Chapter 608 Carina L. Dun Asst. Vice Presi	he appointment as registered ovisions of all statutes liar with and accept the l, Florida Statutes.

\$ 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 "MSKP TOWN AND COUNTRY UTILITY 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 TWENTY-SECOND DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MSKP TOWN AND COUNTRY UTILITY LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MARCH, A.D. 2007.

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

ANYS OF CASE O

4321220 8300

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Varriet Smith Hindson

Harriet Smith Windsor, Secretary of State AUTHENTICATION: 5529351

AUTHENTICATION: 5529351

DATE: 03-22-07