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Corsica Square S.C., LLC

| Certificate of Status | 1        |
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6/21/2007

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

IN COMPLIANCE WITH SECTION 608508, PLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

|                  | 1. Corsica Square S.C., LLC  |              |
|------------------|--|--------------|
| •                | (Name of Foreign Limited Liability Company)  |              |
|                  | 2. Delaware 3.   |              |
|                  | (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)   |              |
|                  | 4. December 20, 2006 5 perpetural  |              |
|                  | (Date of Organization)  (Duration: Year limited liability company will cease to exist or "perpennal")  | 0            |
| •                | 6. July 1, 2007  | <u>_</u>     |
|                  | (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine panelty liability)   | JUN 2        |
|                  | 7  |              |
|                  | c/o Kimeo Realty Corporation, 3333 New Hyde Park Road, New Hyde Park, New York 11042   |              |
|                  | (Street Address of Principal Office)   | င္ပာ         |
|                  | (Street Address of Principal Office)  8. If limited liability company is a manager-managed company, check here   2. All Parts and Parts and Parts are all Parts and Parts and Parts are all Parts ar | ဘ            |
| A to Man         | 9. The name and usual business addresses of the managing members or managers are as follows:   |              |
| · ·- 1, 5, 2, 2, | Corsica Square Holdes, LLC   |              |
|                  |  | •            |
|                  | 3333 New Hyde Park Road  | <b>#</b> . : |
|                  | New Hyde Park, NY 11042  |              |
| and a law to the | 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 under oath of the translator must be submitted.)   | icate        |
|                  | 11. Nature of business or purposes to be conducted or promoted in Florida:   |              |
|                  | To own and manage rest property  |              |
|                  | Signature of a member or an authorized representative of a chember:  (in accordance with section 608.409(3), F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)  Skull M. Kanderen Authorized requires the Typed or printed name of signee   | - <b>t</b>   |

Jan Jan Mar

### 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.

|  | Corsica Square S.C.,                   | LLC  | ·  |  |  |  |
|--|--|--|--|--|--|--|
|  | 2. The name and                        | 2. The name and the Florida street address of the registered agent and office are:   |  |  |  |  |
|  |  | C T Corporation System   | 07<br>SE   |  |  |  |
|  | •                                      | (Name)   | NOF  |  |  |  |
|  | _                                      | 1200 South Pine Island Road  | NSSE<br>ARRIVER  |  |  |  |
|  | _                                      | Florida Street Address (P.O. Box NOT ACCEPTABLE)   |  |  |  |  |
|  |  | Plantation, Florida 33324  | 0 % %  |  |  |  |
|  |  | City/State/Zip   | 53<br>RIDA   |  |  |  |
| in the second se | liability company<br>agent and agree t | ed as registered agent and to accept service of process for the above sta<br>at the place designated in this certificate; I hereby accept the appointme<br>to act in this capacity. I further agree to comply with the provisions of a<br>oper and complete performance of my duties, and I am familiar with and | ent as registered  Il statutes  accept the   |  |  |  |
| and the state of t | obligations of my                      | position as registered agent as provided for in Chapter 608, Florida Ste   | itules.  |  |  |  |
| and the Control of State of the Control of the Cont | obligations of my                      | position as registered agent as provided for in Chapter 608, Florida Sto CT Corporation System  CT Corporation System  CT Corporation System  CT CORPORATION SECURITIES  CT CORPORATION SECURITIES  CT CORPORATION SECURITIES  | itules. A his proposition of the control of the con |  |  |  |

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

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The State and

# Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CORSICA SQUARE S.C., 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 TWENTIETH DAY OF JUNE, A.D. 2007.

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

070732417



DATE: 06-20-07