# Divisior AUG.

### Florida Department of State

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1 CORPORATION SERVICE COMPANY

Account Number : I20000000195

Phone

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#### FLORIDA/FOREIGN LIMITED LIABILITY CO.

CA New Plan Asset, LLC GIGN OF CASPGALIER Certificate of Status Certified Copy 0 Page Count 04 Stimated Charge \$125.00

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NO. 112 P. 4

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

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property is degeneral  2/6/2002 A (0 800)  5. perpetual  (Date of Organization)  5. perpetual  (Date of Organization)  pon qualification	,
(Date of Organization)	ny will cears to
exist or "perpetual") pon qualification	ay will cease to
pon qualification  (Crass first transacted business in Florida, if prior to registration.)  (See acctions 608.501 & 608.502 F.S. to determine pourly liability)	
(Date hist arguments in the case, it prior to regulations) (See sections 608.501 & 608.502 F.S. to determine poughty liability)	
20 Lexington Avenue, 7th Floor	
isw York, NY 10170	
(Street Address of Frincipal Office)	
f limited liability company is a manager-managed company, check here	
he name and usual business addresses of the managing members or managers are as fo	llaws:
Contro NP LLC, 420 Lexington Avenue, 7th Floor	
N	<del></del>
New York, NY 10170	
Attached is an original certificate of existence, no more than 90 days old, duly authoritoated by the	s official having
dy of records in the jurisdiction under the law of which it is organized. (A photocopy is not according to the property of the control of the	ptable. If the certificat
	,
Nature of business or purposes to be conducted or promoted in Fiorida:	<del></del>
al esiste havestment	·
Signature of a member or an authorized representative of a member, (in accordance with section 600.400(3), F.S., the execution of this decement constitutes an affiguation under the parallels of partury that the facts shirth are tree.)	
(in accordance with section 609.408(3), F.S., the execution of this decement constitutes on all translation under the problem of purjusy that the face stated berein are true.)  Stayof P. Siegel, Authorized Representative of Centro NP LLC, Member	
(in secting the still scales 658.408(3), F.S., the execution of this decement constitutes on perjury that the face stated berein are true.)	73.5 (II)
(in accordance with section 609.408(3), F.S., the execution of this decement constitutes on all translation under the problem of purjusy that the face stated berein are true.)  Stayof P. Siegel, Authorized Representative of Centro NP LLC, Member	
In sectorization with section 6004.08(3), F.S., the execution of this decrement constitutes an affiguation under the penaltics of parket, that the face stated berein are tree.)  Stary of F. Siegel, Authorizad Representative of Centro NF LLC, Member  Typed or printed name of signes	
(in accordance with section 609.408(3), F.S., the execution of this decement constitutes on all translation under the problem of purjusy that the face stated berein are true.)  Stayof P. Siegel, Authorized Representative of Centro NP LLC, Member	
In sectorization with section 6004.08(3), F.S., the execution of this decrement constitutes an affiguation under the penaltics of parket, that the face stated berein are tree.)  Stary of F. Siegel, Authorizad Representative of Centro NF LLC, Member  Typed or printed name of signes	I AUG

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H07000207165

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507. FLORIDA STATUTES, THE

Undersigne To designat Florida.	D LIMITED LIABILITY CO TE A REGISTERED OFFICI	OMPANY SUBMITS THE FOLLOW E AND REGISTERED AGENT IN TH	ING STATEMENT IE STATE OF
1. The name of	f the Limited Liability Comp	pany is:	
CA New Pl	an Asset, LLC		
If name unavai	lable, the alternate name to b	be used in the state of Florida is:	
2. The name a	nd the Florida street address	of the registered agent and office are	:
	Corporation Service Co	ompany	
		(Name)	
*	1201 Hays Street		
	Florida Street Add	ireas (P.O. Box <u>NOT</u> ACCEPTABLE)	
	Tallabassee	FL 32301	
	-	City/State/Zip	<del></del>
liability compan agent and agree relating to the p obligations of m	ty at the place designated in t to act in this capacity. I furt roper and complete performs	to accept service of process for the about its certificate, I hereby accept the apputer agree to comply with the provision tree of my duties, and I am familiar wit as provided for in Chapter 608, Flori	ointment as registered us of all statutes th and accept the
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation of Registered Agent	2007 AUG 15 PH 5 SECKETARY OF TALLAHASSEE, FOR

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## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CA NEW PLAN ASSET, 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 SIXTEENTH DAY OF AUGUST, A.D. 2007.

AND I DO HERBBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HERBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CA NEW PLAN ASSET, LLC" WAS FORMED ON THE SIXTH DAY OF FEBRUARY, A.D. 2002.

3488974 8300 070927840

AUTHENTICATION: 5931354

DATE: 08-16-07

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