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To:

Division of Corporations

Fax Number : (850) 617-6383

Account Name : GREENBERG TRAURIG (ORLANDO)

Account Number: 103731001374 Phone : (407) 418-2435 1 (407) 420-5909

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## ORIDA/FOREIGN LIMITED LIABILITY CO.

## MPC Manager LLC

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## 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

I. MPC Manager LLC		
(Name of foreign lim	ited liability company)	
Delaware  (Jurisdiction under the law of which foreign limited liability company is organized)	3 Applied For (FEI number, if applicable)	<b>–</b>
4. October 5, 2007 (Date of Organization)	5 Perpetual (Duration: Year limited liability company will certo exist or "perpetual")	 asc
6. Upon Acceptance		
(Date first transacted business in Florida. (See	sections 608 501, 608 502, and 817.155, F.S.)	0
7. c/o Bola Capital LLC. One Independent Drive,	Suite 1850	07 QCT
Jacksonville, Florida 32202		
	f principle office)	=
8. If limited liability company is a manger-managed cor	<u> </u>	
9 The name and usual business addresses of the manag MAIT Holdings LLC	ing members or managers are as follows:	<u> </u>
c/o Eols Capital LLC		<u> </u>
One Independent Drive, Suite 1850		
Jacksonville, Florida 32202		
	the law of which it is organized. (A photocopy is uage, a translation of the certificate under oath of promoted in Florida: Acquire hold, operate, manages of real estate located in Florida.	not the
Signsture of a member or art author (in accordance with scotton 605 405(3), F.S. an affirmation under the penaltics of per	, the execution of this document constitutes	

William G. Evans
Typed or printed name of signee

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# CERTIFICATE OF DESIGNATION OF REGISTER 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

1 The name of Limited Liability Company is:

MPC Manager LLC

2. The name and the Florida street address of the registered agent and office are:

William G. Evans (Name)

c/o Bola Capital LLC. One Independent Drive. Suite 1850 Florida street address (P.O. Box NOT ACCEPTABLE)

> Jacksonville, FI\_32202 (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 figure as provided for in Chapter 608, F.S.

(Signature)

\$100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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# Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MPC MANAGER 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 ELEVENTH DAY OF OCTOBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MRC MANAGER LLC" WAS FORMED ON THE FIFTH DAY OF OCTOBER, A.D. 2007.

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

071104863

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6064973

DATE: 10-11-07

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