Division of Corporations

3056339696

EMPIRE CORP KIT

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Florida Department of State

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Division of Corporations

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From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255 : (305)634-3694

: (305)633-9696

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

C. WILSON, LLC

Certificate of Status 0 Certified Copy 1 Page Count 03 **Estimated Charge** \$155.00

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December 26, 2007

FLORIDA DEPARTMENT OF STATE

Division of Corporations

EMPIRE CORPORATE KIT COMPANY

SUBJECT: C. WILSON 79, LLC

REF: W07000061683

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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Neysa Culligan Document Specialist FAX Aud. #: H07000304724 Letter Number: 707A00071299

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WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

Members of C. WILSON, LLC	<u></u>
(Name of Limited Liability Company)	
a limited liability company duly organized and existing under the laws of	
DELAWARE	
(State or Country of Organization)	
Because the name of this foreign limited liability company does not satisfy the	
requirements of the s. 608.406, F.S., the limited liability company hereby adopts	tha .
	, me
following name to transact business in the state of Florida:	
C. WILSON 79, LLC	PS P
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)	CRE CRE
Date: DEC. 24, 2007	ASE 26
Date: Dec. & 4, 200 7	SEE TO
Signature(s) of Manager(s) and/or Managing Member(s):	F ST G:
NICOLAS BROCHERIE	DD NG
	- BH 6
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FORE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	1GN
1 C. WILSON, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
C. WILSON 79, LLC	
(if name unavailable, enter alternate name adopted for the purpose of transacting business in Florids and attach a copy of the writ consent of the managers or quanaging members adopting the alternate name. The alternate name must include "Limited Liability	ten
Company," "L.L.C.," "LLC.")	
2. DELAWARE (Jurisdiction under the law of which foreign immited liability (FEI number, if applicable) company is organized)	
company is organized) (Trustication under the law of which threigh implied hability (FEI number, if applicable)	
4. DECEMBER 6, 2007 5. (Duration: Year limited liability company will cause to	
(Date of Organization) (Duration: Year limited liability company will cause to exist or "perpetual")	
6. DECRIBER 6, 2007 Sur 9	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.50) & 608.502 F.S. to determine penalty liability)	and a
1 4770 BISCAYNE BOULEVARD # 1430	(1) (1) (1) (1) (1) (1) (1) (1)
7 110 DISCHTILE DOLLENTED 1450) #
MIAMI, FLORIDA 33137 (Screet Address of Principal Office)	
(Sarsal Address of Principal Office)	o 🛴
8. If limited liability company is a manager-managed company, check here	<u>ک</u> ر ک
F. The name and usual business addresses of the managing members or managers are as follows:	
NICOLAS BROCHERIE	
4770 BISCAYNE BLWO. #1430	
MIAMI, FLORIDA 33137	
THAT, TOLOTOF SOIDT	
10. Attached is an original cartificate of existence, no more than 90 days old, duty authenticated by the official having custody of records	İ
he jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under each of the translator must be submitted.)	
SACRETOR OF The Controller (NICE Com) Of the Grandship Lines (De Procliment)	
1. Nature of business or purposes to be conducted or promoted in Florida:	
REAL ESTATE HOLDINGS	
Chal XXII	
Signature of a member or an authorized representative of a member.	
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
mr restrictions on the best made in the think that the same and the sa	
Typed or printed name of signce	•
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H07000304704	

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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.

C. WILSON, LLC	·
If name unavailable, the alternate name to be used in the state of Florida is: C. WILSON 79, LLC	•
2. The name and the Florida street address of the registered agent and office are: CHARLES S. SERFATY (Name) 4770 BISCAYNE BUD. #1430 Florida Street Address (P.O. Box NOT ACCEPTABLE) TIAMI, FLORIDA 33137— City/State-Zip	OT DEC 26 AH 8: 26 SECRETARY OF STATE TALLAHASSEE FLORIDA

Hoving 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 Stanutes.

(Signsture)

1. The name of the Limited Liability Company is:

5 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Cortified Copy (optional)

S 5.00 Certificate of Status (optional)

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Delaware

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "C. WILSON, 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 SIXTH DAY OF DECEMBER, A.D. 2007.

4451884 8300 071290572



Daniet Smile Handen

AUTHENTICATION: 6214129

DATE: 12-06-07

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