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### ORIDA/FOREIGN LIMITED LIABILITY CO.

#### RLV BOCA SPC 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 SUBMIT! LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	TED TO REGISTER A FOREIGN
, RLV BOCA SPC LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "	L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Floridz consent of the managers or managing members adopting the alternate name. The alternate name must company," "L.L.C.," "LLC.")	and anach a copy of the written st include "Limited Liability
2. DRLAWARE 3	
(Jurisdiction under the law of which foreign limited liability (FEI number, if a company is organized)	pplicable)
4. DECEMBER 26, 2007 5.	
(Date of Organization) (Duration: Year limited liabilit exist or "perpetual")	y company will coase to
6. UPON FILING	
(Date first transacted business in Florida, if prior to registration.) (See acctions 608.501 & 608.502 F.S. to determine penalty liability)	07 SE
7. 31500 Northwestern Highway, Suite 300	
Fartoington Hills, MI 48334	LAS C 27
(Street Address of Principal Office)	Lu-<
8. If limited liability company is a manager-managed company, check here	F S
9. The name and usual business addresses of the managing members or managers a	ne av trittina 555 🚅 💴 💴
Ramoo/Lion Venture LP	D.F. 7
31500 Northwestern Highway. Suite 300, Farmington Hills, MI 48334	
10. Attached is an original certificate of existence, no more than 90 days old, thely authenticated by the off the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is translation of the certificate under each of the translation passate authentited.)	
11. Nature of business or purposes to be conducted or promoted in Florida:	
To be the general partner of a Delawaye limited partnership	
Signature of a member or an authorized representative of a member of an authorized representative of a member of the accordance with section 608.408(3), F.S., the execution of this document consum affirmation under the penalties of perjury that the facts stated herein are true.)	tirutes
DENNIS GERSHENSON Protident & Typpkesprinted annicof signed	<u>CE 0</u>
PLOST - 04/2 \$/2007 CT System Cultur	

# 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.

1. The name of the Limited Liability C	ompany is:			
If name unavailable, the alternate name	to be used in the state of	of Florida is:		
2. The name and the Florida street addi	ress of the registered ag	ent and office are:		
	C T Corporation System		TAL SE	07
	(Name)		CRE	30'
1200 South Pine Island Road		IAS	0EC 27	
Florida Street	Address (P.O. Box NOT	ССЕРТАВЬБ)	SEE.	7
Plantation	FL.	33324	of STA	WHIO: L
	City/State/Zip		TATE	7
Having been named as registered agent a liability company at the place designated agent and agree to act in this capacity. I relating to the proper and complete performance obligations of my position as registered at CT Comportion System  By:  (Signature)  \$ 100 \$ 25 \$ 30 \$ 5	in this certificate, I here further agree to comply formance of my duties, an agent as provided for in  A  0.00 Filing Fee for Ap  1.00 Designation of F	eby accept the appoints with the provisions of all am familiar with an Chapter 608, Florida Society Secretar optication Registered Agent optional)	nent as regi all statutes d accept th	istered

FL057 - 06/28/3007 C T System Colors .

# Delaware

PAGE

#### The First State

I, HARRIET SMITE WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RLV BOCA SPC 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-SEVENTH DAY OF DECEMBER, A.D. 2007.

O7 DEC 27 AH IO: L7
SECRETARY OF STATE
TALLAHASSEE, FI DBIG

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071365070

You may warify this costificate onling of cosp. delaware.gov/authver.shtml

Daniel Smile Hindre

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6266\$67

DATE: 12-27-07

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