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SECRETARY OF STATE
ALLAHASSEF, FLORIDA

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COVER LETTER

TO: Registration Section

Division of Corporations				
SUBJECT: SF Berkshire, LLC				
	mited Liability Company)			
The enclosed "Application by Foreign Limited L Florida," Certificate of Existence, and check are liability company to transact business in Florida.	submitted to register the above referenced			
Please return all correspondence concerning this	matter to the following:			
Todd Reynolds				
1)	Name of Person)			
Cypress Administrative S				
(F	Firm/Company)			
44 South Broadway, Suite 614		SEG	J 80	
	(Address)	AHA:	6- NNF 80	1
White Plains, NY 10601		SEE SEE		FILED
(City/State and Zip Code)		<u> </u>	PH 4:	Ö
For further information concerning this matter, p	lease call:	ARY OF STATE SSEE, FLORIDA	56	
Todd Reynolds	at (914) 390-4301 (Area Code & Daytime Telephone 1			
(Name of Person)	(Area Code & Daytime Telephone I	Number))	
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\int\\$125.00\text{ Filing Fee} \text{\$\int\}\$130.00\text{ Filing Fee} \text{Certificate}\$		g Fee, Cer tatus & Ce		

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: SF Berkshire, LLC (Name of Foreign Limited Liability Company) **DELAWARE** (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 05/06/2008 **PERPETUAL** (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) **Gulf Coast Facilities, LLC** 44 South Broadway, Suite 614 White Plains 10601 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follow **Gulf Coast Facilities, LLC** 44 South Broadway, Suite 614 White Plains, NY 10601

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 is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

The nature of business to be conducted is any lawful purpose under Florida Statutes.

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.)

Arl Markenson, Authorized Representative

Typed or printed name of signee

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 th	e Limited Liability Compan	y is:				
·	SF Be	rkshire, LLC				
2. The name and	the Florida street address of	the registered a	agent and office are:			·
_	National Corpo	orate Research,	Ltd., Inc.			
		(Name)				
	515 Ea	ast Park Avenu	e	SEC TALL,	C 80	
_	Florida Street Addres	s (P.O. Box NO)	ACCEPTABLE)		Ę	-1
-	Tallahassee	FL City/State/Zip	32301	ASSEC F	-9 PM	
liability company o agent and agree to relating to the prop	ad as registered agent and to a at the place designated in this act in this capacity. I furthe per and complete performance position as registered agent a (Signature)	certificate, I he ragree to comp e of my duties,	reby accept the appo ly with the provision and I am familiar wit	pintment as registered s of all statutes th and accept the	3: 56	

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SF BERKSHIRE, 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 SECOND DAY OF JUNE, A.D. 2008.

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080644489

You may verify this certificate online at corp.delaware.gov/authver.shtml

Warriet Smith Windson, Secretary of State

Harriet Smith Windsor, Secretary of St

AUTHENTICATION: 6627031

DATE: 06-02-08