

Florida Department of State
Division of Corporations
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To:

Division of Corporations

Pax Number : (850) 617-6383

 $E(n) \circ m :$

Account Name : GREENBERG TRAURIC - FORT LAUDERDALE

Account Number : 120040000196 Phone : (954)765-0500

Fax Number: : (954)765-1477

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CHANNELSIDE PLACE LLC

Certificate of Status	1
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Page Count	94-7
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W08-50173

J. BRYAN

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Corporate Filing Menu

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EXAMINER

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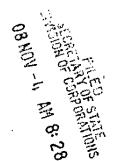
11/4/2008

November 4, 2008

COLLEEN BRUNG GREENBERG TRAURIG, P.A. 401 E LAS OLAS BLVD., SUITE 2000 FORT LAUDERDALE, FL 33301

SUBJECT: CHANNELSIDE PLACE LLC

REF: W08000050173



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.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

RECEIVED

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SECRETARY OF STATE

SECRETARY OF STATE

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

FAX Aud. #: H08000248864 Letter Number: 708A00056022

CHARMOR CORPORATIONS

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

We, the undersigned, do hereby certify that we are the Managers and/or Managing	
Members of CHANNELSIDE PLACE LLC	.,
(Name of Limited Limbility Contumy)	
a limited liability company duly organized and existing under the laws of	S
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 Hability company hereby adopts the	:
following mane to transact business in the state of Florida:	
CHANNELSIDE PLACE HOLDINGS LLC	
(Name to used by limited liability company in Florids, NOTE, Name must and with Limited Liability Company U.L.C., or LLC.)	_
Date: November 4, 2008	
Signature(s) of Manager(s) and/or Managing Member(s):	
Little Total Character Comments	
- Bobest Halles through	-
	-

CRZE122 (7/07)

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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 POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Channelside Place	LLC			
(Name of Foreign Limited Lial	ollity Company; must include	le "Limited Liability Com	pany," "L.L.C.," or "LLC	C.")
CHANNELST DE PLACE HOLI	- ****	W7.W4		
(If name unavailable, enter alternate n consent of the managers or managing Company," "L.L.C.," "L.L.C.")	ame adopted for the purpos members adopting the after	e of transacting business in nate name. The alternate n	n Florida and attach a co ame must include "Limit	py of the written ted Liability
2 Delaware	3.	98-0600295 (FEI num		
(Jurisdiction under the law of which company is organized)	loreign limited liability	(FEI num	ber, if applicable)	
4. October 7, 2008	5.	Perpetual		r 0x
(Date of Organization	n)	(Duration: Year limited exist or "perpetual")	d liability company will t	ceams to S
L		the first of the f		る影
6. (Date firs	t transacted business in Flor ns 608.501 & 608.502 F.S.	rida, if prior to registration	(a)	一鬼
		to determine penatry natur	пу)	5.6
7. 918 Channelside	Dive			
Tampa, Florida 33	3602			œ <u>É</u>
and the second s	(Street Address o	f Principal Office)		8
8. If limited liability company i	s a manager-managed o	company, check here [I	
9. The name and usual business	addresses of the mana	ging members or man	agers are as follows:	
Gordon Laing, Chie	f Executive Mar	nager, 100-147	5 Lower Water	Street
Halifax, N.S. B3J	3Z2			
Robert Macpherson,	Manager-6017	Quinpool Road,	Halifax, N.S.B	3K 5J7
10. Attached is an original certificate of the jurisdiction turker the law of which i translation of the certificate turker cath o	t is enganized. (A photocopy Fibe translator must be subm	is not acceptable. If the certifited.)	lificate is in a foreign lang	
11. Nature of business or pu	rposes to be conducted a	r promoted in Florida:	All lawful	
purposes.				
	1-10 pl	,		
(In accor	ure of a member or an audance with section 608,408(3), I nation under the penalties of per	F.S., the execution of this docu	ment constitutes	
A New AssessMan	ROBERT MACE	HERSON		

H080002488643

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 Company is:

	de Place LLC able, the alternate name to	be used in the st	ate of Florida is:	The second secon
CHANNELSTE	DE PLACE HOLDINGS LLC			
2. The name an	d the Florida street addres	ss of the registere	d agent and office are:	
	CorpDirect Age	nts, Inc.		08 NOV -4
	515 E. Park Ave	enue		
	Florida Street A	ddress (P.O. Box N	OT ACCEPTABLE)	至
	Tallahassee	FL	32301	8: 28
		City/State/Zit		
liability company agent and agree relating to the pr	o at the place designated in to act in this capacity. I fi oper and complete perfort	othis certificate, I wther agree to cor nance of my dutie.	e of process for the above sta hereby accept the appointin uply with the provisions of a s, and I am familiar with and in Chapter 608, Florida St	ient as registered ill statutes d accept the
	\$ 100.0 \$ 25.0 \$ 30.0	0 Designation	r Application of Registered Agent	

5.00 Certificate of Status (optional)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHANNELSIDE PLACE 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-NINTH DAY OF OCTOBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHANNELSIDE PLACE LLC" WAS FORMED ON THE SEVENTH DAY OF OCTOBER, A.D. 2008. AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

SECRETARY OF STATE
JIVISION OF CORPORATIONS

4609406 8300

NOT BEEN ASSESSED TO DATE.

081075607

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

Daniel Smila Hindson

Harriet Smith Windsor, Secretary of Shife

AUTHENTICATION: 6938558

DATE: 10-29-08

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