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To:

Division of Corporations

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From:

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Alcat Ft. Pierce, LLC

| Certificate of Status | 1, |
|-----------------------|----------|
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Corporate Filing Menu

NOV 25 2008

EXAMINER

: C T CORPORATION SYSTEM Account Number : FCA000000023 : (850)222-1092 : (850)878-5926

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:

| (Name of Foreign Limited Liability Con | npany; must include "Lis | mited Liability Company," "L.L.C.," or "LLC.") | | |
|--|--|---|--------------|--------------|
| consent of the managers or managing members Company," "L.L.C.," "LLC.") | | ansacting business in Florida and attach a copy of the ame. The alternate name must include "Limited Link | | |
| 2. Delaware (Jurisdiction under the law of which foreign company is organized) | imited liability 3. | (FEI number, if applicable) | _ | |
| 4. November 20, 2008 | 5. | | | |
| (Date of Organization) | | uration: Year limited liability company will cease to ist or "perpetual") | , | |
| 6. | • | | | |
| (Date first transacti (See sections 608.50 | ed business in Floride, if 1-& 608.502 F.S. to date | prior to registration.) rmine penalty liability) | | 0 |
| 7. c/o Henri J. DesPluines, J.J. Taylor Compar | ies, Inc., 665 North A17 | A, Jupimer, Florida 3347? | AON 80 | ¥SE SE |
| | | | 8 | 三 岩 |
| | (Street Address of Princ | cipal Office) | 124 | 위 <u>로</u> . |
| 8. If limited liability company is a man | ager-managed compa | any, check here 🔀 | PM | |
| 7. The name and usual business addresses of the managing members or managers are as follows: | | | | gv. |
| John J. Taylor, III, c/o J.J. Taylor Compani | es, Inc., 665 North AlA, | Jupiter, Florida 33477 | 53 | |
| | | | _ 57 | 77 |
| | | | _ | |
| | ed. (A photocopy is not a | duly authenticated by the official having custody of rescreptable. If the certificate is in a foreign language, a | cords in | |
| 1. Nature of business or purposes to be | conducted or prome | oted in Florida: To invest in real estate and | - | |
| • | | n and/or to engage in any other lawful business | | |
| Dak | | | - | |
| (In accordance with sec | tion 608 .408(3), P.S., the ea | d representative of a member, secution of this document constitutes no facts stated herein are true.) | 1 | |
| | Authorized Representati | • | • | |
| Ty | ed or printed name | of signee | | |

FL057 - 06/28/2((07 C Y Eyaton Outline

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or G08.507, 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 Cor | npany is: | | | | |
|---|--|--|--|--|--|
| Alcar Ft. Pierce, LLC | | | | | |
| If name unavailable, the alternate name to | be used in the sta | ate of Florida is: | | | |
| 2. The name and the Florida street address | ss of the registered | d agent and office arc: | | | |
| c | T Corporation System | sm . | | | |
| ها الله الله الله الله الله الله الله ا | (Name) | ************************************** | | | |
| .120 | O South Ping Island R | Road | | | |
| Florida Street Addicas (P.O. Box NOT ACCEPTABLE) | | | | | |
| Plantation | FL | 33324 | | | |
| | City/State/Zip | | | | |
| Having been named as registered agent and liability company at the place designated in agent and agree to act in this capacity. I furelating to the proper and complete perform obligations of my position as registered age C/T Capacitation System By: SALVENA AMENTA-GRAY SPECIAL ASSISTANT SECRETARS 100.00 \$ 25.00 \$ 30.00 \$ 5.00 | this cartificate, I herefore og the property of the provided for the filling Fee for Designation of Certified Copy | hereby accept the appointment as registered aply with the provisions of all statutes and I am familiar with and accept the in Chapter 608, Florida Statutes. Application of Registered Agent | | | |

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALCAT FT. PIERCE, 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-FIRST DAY OF NOVEMBER, A.D. 2008.

AUTHENTICATION: 6982631

DATE: 11-21-08