## Division d'Corporations Florida Department of State Division of Corporations Public Access System

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JUN 2 9 2009

EXAMINER

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6/26/2009

## 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:

			sacting business in Florida and attach a co	
	he managors or managing monibers ado "L.L.C," "LLC.")	pling the alternate nam	ic. The alternate name must include "Lini	ited Liubility
2	Delaware	3	27-0428250	
company	Delaware ion under the law of which foreign limit is organized)	-	27-0428250 (FEI number, if applicable)	
	June 23, 2009	5.	Perpetual	
·	June 23, 2009 (Date of Organization)	(Dur exist	Perpetual ation: Year limited liability company wilf or "perpetual"}	cease to
Upon qu	nalification			
	(Date first transacted by (See sections 608.501 &	608.502 P.S. to deter	rior to registration.) nine penalty linbility)	
245 Parl	k Avenue, 2nd Floor			
New Yo	ork, NY 10167			
	(Su	reet Address of Princip	oal Office)	
Iflimit	ed lighility company is a manage	r-manaved compar	v check here	
	ed liability company is a manage me and usual business addresses		ny, check here embers or managers are as follows	:
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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.

1. The name of the Limited Liability Company is:

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If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System
(Name)
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation
FL 33324
City/State/Zip

Having 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 Statutes.

C T Corporation System By: (Signature)

- \$ 109.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)



PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DORAL G2 PHASE 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-FIFTH DAY OF JUNE, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

of State

AUTHENTICATION: 7385019

4701739 8300

090650186 You may varify this curtificate online at corp. dolaware.gov/authvar.shthl