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L. SELLERS

Division of Corporations

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FEB 2 5 2010

From:

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Account Name : C T CORPORATION SEXAMINER

Account Number : FCA000000023

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: (850)878-5368

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### FLORIDA/FOREIGN LIMITED LIABILITY CO. CM Doral IDF Company LLC

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Page Count		05	0.
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#### **COVER LETTER**

Name of Limited Liability Company	
gn Limited Liability Company for Authorization to Transact Business in Florida to register the above referenced foreign limited liability company to transact bus	a," Certificate o sincas in Plorid
nceming this matter to the following:	
Tara Nyaok	
Name of Person	•
Stroock & Stroock & Lavan LLP	
Firm/Company	
180 Maiden Lane	
Address	
New York, NY 10038	
City/State and Zip Code	
sychulz@stroock.com	_
• •	
Vyack at ( 212 ) 806-6404	_
Person Area Code & Daytime Telephone Number	
STREET ADDRESS: Division of Corporations Registration Section	
Clifton Building 2661 Executive Center Circle Tailahassee, PL 32301	
lowing amount:	
	gn Limited Liability Company for Authorization to Transact Business in Florida to register the above referenced foreign limited liability company to transact busineeming this matter to the following:  Tara Nyaok  Name of Person  Stroock & Stroock & Lavan LLP  Firm/Company  180 Maiden Lane  Address  New York, NY 10038  City/State and Zip Code  suchutz@stroock.com  mail address: (to be used for future annual report notification)  this matter, please call:  Nyack  at ( 212 ) 806-6404  Person  Area Code & Daytime Telephone Number  STREET ADDRESS:  Division of Corporations  Registration Section Clifton Building 2661 Executive Center Circle

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT REISTORS: IN THE STATE OF BY OPIDA:

	CM Doral II	DF Company LLC	
(Nam	of Foreign Limited Liability Company; must in	DF Company LLC clude "Limited Liability Company," "L.L.C.," or "LLC.	")
neut of th	vailable, euter alternate name adopted for the pure e managers or managing members adopting the a L.L.C," "LLC.")	pose of Impracting business in Florida and attach a copy ilternate name. The alternate name must include "Limited	of the written d Liability
	Delaware	3	
hirisdiction ompany i	Delaware at under the law of which foreign limited liability s organized)	3. (FEI number, if applicable)	
	2/12/2010 (Date of Organization)	5. Perpotual	
	(Date of Organization)	Perpetual     (Duration: Year limited liability company will ceaxist or "perpetual")	asc to
	Upon Qualification		
	(Date first transacted business in ) (See sections 608,501 & 608,502 F.	Florida, if prior to registration.) S. to determine penalty liability)	
	A. N. M. I AMELOLOG		
	(Street Addres	ss of Pzincipal Office)	
Tf limita	d liability company is a manager-manage	ad company, obtak hava	
		<u>—</u>	
The nan	e and usual business addresses of the ma	inaging members or managers are as follows:	
Sole Me	nber: Miscellanous Income Corp.		
P.O. Box	5005, New York, NY 10163-5005		
urisdiction		O days old, duly authenticated by the official having custody ppy is not acceptable. If the certificate is in a foreign langua havitted.)	
jurisdiction slation of	under the law of which it is organized. (A photoco he certificate under ceth of the translator must be sul of business or purposes to be conducted or	py is not acceptable. If the certificate is in a foreign langua	१९८, a
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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 REGISTBRED OFFICE AND REGISTBRED AGENT IN THE STATE OF FLORIDA.

	the Limited Liability Company is:  CM Dorel IDF Company LLC				
If unavailable, the alternate to be used in the state of Florida is:					
2. The name and	d the Florida street address of the registered agent and office are:				
,	C T Corporation System				
	(Namo)				
	1200 South Pine Island Road				
•	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Pluntation FL 33324				
•	City/State/Zip				
liability company agent and agree t relating to the pro obligations of my	ned as registered agent and to accept service of process for the above stated limited of the place designated in this certificate, I hereby accept the appointment as register to act in this capacity. I further agree to comply with the provisions of all statutes oper and complete performance of my duties, and I am familiar with and accept the position as registered agent as provided for in Chapter 608, Florida Statutes, reparation System  Connection System				
<del></del>	(Spenature) Assistant Secretary				
	\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent				
	C 30 00 Cartified Conv (antional)				

5.00 Certificate of Status (optional)

# Delaware

PAGE

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CM DORAL IDF COMPANY 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-FOURTE DAY OF FEBRUARY, A.D. 2010.

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

**4**787**592** 8300

100196293

DATE: 02-24-10

AUTHENTYC

Joffrey W. Bullock, Secretary of 50