

M100000063320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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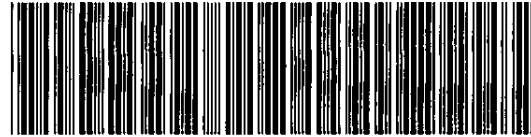
(Business Entity Name)

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T. HAMPTON

JUL 28 2010

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DORAL SID LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Bridget M. Stuhr  
Name of Person

Kutak Rock LLP  
Firm/Company

1650 Farnam Street  
Address

Omaha, NE 68102  
City/State and Zip Code

bridget.stuhr@kutakrock.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sidney Domb at ( 305 ) 358-7711  
Name of Person Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee    ☒ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**KUTAK ROCK LLP**  
THE OMAHA BUILDING  
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OMAHA, NEBRASKA 68102-2186  
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SCOTTSDALE  
WASHINGTON  
WICHITA

BRIDGET M. STUHR  
bridget.stuhr@kutakrock.com  
(402) 346-6000

July 26, 2010

**VIA FEDEX OVERNIGHT**

Florida Department of State  
Division of Corporations  
Registration Section  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Doral Sid LLC

Dear Madam or Sir:

Enclosed herein for filing, please find the following items in connection with the above-referenced limited liability company:

1. Cover Letter to Registration Section, Division of Corporations;
2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
3. Certificate of Designation of Registered Agent/Registered Office; and
4. Original "Certificate of Existence" from the State of Delaware.

I have also enclosed a check, made payable to the Florida Department of State in the amount of \$130.00, to cover the filing fee. Please return evidence of filing to my attention in the prepaid FedEx envelope, which I have provided for your convenience.

If you have any questions or need additional information, please feel free to contact me. Thank you for your assistance in filing this document.

Sincerely,



Bridget M. Stuhr  
Legal Assistant

bms

Enclosures

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. DORAL SID LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Delaware 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 5/27/2010 5. perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 701 Brickell Avenue, Suite 1300  
Miami, Florida 33131  
(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 follows:

Sidney Domb, 701 Brickell Avenue, Suite, 1300, Miami, Florida 33131

Sidney Domb Revocable Inter Vivos Trust, 701 Brickell Ave., Suite 1300, Miami FL 33131

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: To engage in the  
ownership, operation and management of real property in Florida

  
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.)

Sidney Domb  
Typed or printed name of signer

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10 JUL 27 AM 10:20  
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DIVISION OF CORPORATIONS

**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:

Doral Sid LLC

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:

Sidney Domb

(Name)

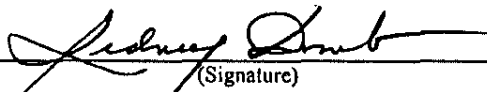
701 Brickell Avenue, Suite 1300

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Miami FL 33131

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.*

  
(Signature)

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

# Delaware

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*The First State*


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DORAL SID 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-THIRD DAY OF JULY, A.D. 2010.



4822671 8300

100767402

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8130625

DATE: 07-23-10