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CUSTOMER NO:

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CUSTOMER: Lila E. Gaston, Legal Asst

Akin Gump Strauss Hauer &

20th Floor

590 Madison Avenue New York, NY 10022

#### FOREIGN FILINGS

OLD FORGE MANAGEMENT, L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

Name Availability Document Examiner Updater Updater Verifyer Acknowledgemer W. P. Verifyer



### 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:

| me of foreign limited liability company r<br>if not so contained in the name at preser                     |                                      | C." is not an acceptable suffix in                                | Florida.)                   |           |
|--|--------------------------------------|---|-----------------------------|-----------|
| DELAWARE   | 3                                    |   |                             | -         |
| risdiction under the law of which foreign<br>mpany is organized)   | hmited hability                      | (FEI number, if applicable  | s)                          |           |
| JULY 14, 1995 –  | 5.                                   | PERPETUAL   |                             |           |
| (Date of Organization)   | (D                                   | uration: Year limited liability co<br>se to exist or "perpetual") | empany will                 |           |
| UPON FILING  |                                      |   | 1155 7 03                   | ٠.        |
| (Date first transacted busine  | ss in Florida. (See se               | ctions 608,501, 608,502, and 817                                  | (.155, F.S.)                |           |
| 555 SOUTH FEDERAL HI   | GHWAY, SUI                           | TE 260  |                             | -         |
| BOCA RATON, FLORIDA  | 33432                                |   |                             | -         |
| (Str   | eet address of princip               | oal office)   |                             |           |
| ist name, title, and business addres<br>nanage the foreign limited liability o                             | s of each managrompany in Florida    | ng member[MGRM] or mage if:                                       | mager[MGK]wno<br>necessary) | ,         |
| nanage the foreign limited liability c   | ompany in Florida                    | ng member[MGRM] or mage if:  [AME & ADDRESS:                      | mager[MGK]Wnonecessary)     | )         |
| nanage the foreign limited liability c   | ompany in Florid                     | a: (attach additional page if:                                    | necessary)                  | )         |
| nanage the foreign limited liability c  NAME & ADDRESS:  T   | ompany in Florida  TTLE:  N  MGRM    | a: (attach additional page if:                                    | necessary)                  |           |
| nanage the foreign limited liability c  NAME & ADDRESS:  KIRIL SOKOLOFF                                    | ompany in Florida  TTLE:  N  MGRM    | a: (attach additional page if:                                    | necessary)                  |           |
| nanage the foreign limited liability of NAME & ADDRESS: T  KIRIL SOKOLOFF  555 SOUTH FEDERAL H             | ompany in Florida TTLE:  MGRM LGHWAY | a: (attach additional page if:                                    | necessary)                  | NUL 86    |
| nanage the foreign limited liability of NAME & ADDRESS: T  KIRIL SOKOLOFF  555 SOUTH FEDERAL HIS SUITE 260 | ompany in Florida TTLE:  MGRM LGHWAY | a: (attach additional page if:                                    | necessary)                  | 98 JUN -3 |
| nanage the foreign limited liability of NAME & ADDRESS: T  KIRIL SOKOLOFF  555 SOUTH FEDERAL HIS SUITE 260 | ompany in Florida TTLE:  MGRM LGHWAY | a: (attach additional page if:                                    | necessary)                  | - NUL 86  |

Dec. 22, 1997 6:44PM

## State of Delaware Office of the Secretary of State

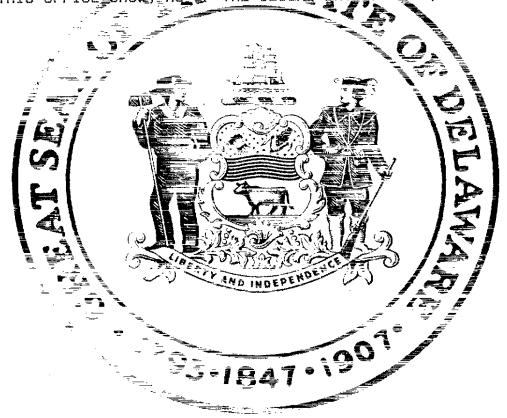
I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "OLD FORGE MANAGEMENT, L.L.C." 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, TAS OF THE SECOND DAT OF JUNE, A.D. 1998.



SECRETARY OF STATE DIVISION OF CORPORATIONS



Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

2524478 8300

DATE:

9113987

981210474

06-02-98

### 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, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

| 1. The name of the lim | ited liability company is: _ | OLD FORGE         | MANAGEMENT, | L.C. | <u></u> |             |
|------------------------|------------------------------|-------------------|-------------|------|---------|-------------|
| 2. The name and addr   | ess of the registered ager   | nt and office is: |             |      | 98      | SIVIO       |
|                        | CT CORPORATION S             | YSTEM             | <u> </u>    |      | MUL     | SEC         |
|                        | (Name)                       | •                 |             |      | 1       | 유로구         |
|                        | 600 EAST JEFFERS             | ON STREET         | -           |      | ယ       | 82          |
|                        | (P.O. Box not acc            | eptable)          | <del></del> | •    | P.      | 중국          |
|                        | TALLAHASSEE, FLO             | RIDA 32301        |             |      | **      | RATE A      |
|                        | (City/State/i                | Zip)              |             |      | 28      | SKOLL<br>TE |

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.

### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

| The undersigned member or authorized representative of  | of a member of O                         | LD FORGE                  | MANAGEMENT |
|---|--|---------------------------|------------|
| L.C.  | deposes and :                            | says:                     |            |
| 1) the above named limited liability company has at least   | et two members                           |                           |            |
| 2) the total amount of cash contributed by the member(s   | i) is \$ <u>130,475</u>                  | 5.20 .                    | •          |
| 3) if any, the agreed value of property other than cash of \$ A description of the property               | ontributed by mem<br>y is attached and r | nber(s) is<br>made a part | hereta.    |
| 4) the total amount of cash or property anticipated to be \$130,475,20 . This total includes amounts from | contributed by me<br>a 2 and 3 above.    | ember(s) is               |            |
|   |  | ·                         |            |

Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavil constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

OR JUN -3 PM 1: 28