

SENT BY: RUDEN MCCLOSK

; 6-19-98 2:52PM ;

305→ Department of State;# 6

M9800000000647

6/19/98

FLORIDA DIVISION OF CORPORATIONS  
PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET

2:50 PM

((H98000011503 3)))

TO: DIVISION OF CORPORATIONS

FAX #: (850) 922-4000

FROM: RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL,  
CONTACT: SUSAN ~~OSBORNE~~ MARC SHAFER  
PHONE: (954) 761-2910

ACCT#: 076077000521

FAX #: (954) 764-4996

NAME: 1750 UNIVERSITY L.C.

AUDIT NUMBER.....H98000011503

DOC TYPE.....FOREIGN LIMITED LIABILITY COMPANY

CERT. OF STATUS...1

PAGES..... 6

CERT. COPIES.....1

DEL.METHOD.. FAX

EST.CHARGE.. \$346.25

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX  
AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND <CR>:

Name	MCC
Availability	MCC
Document Examiner	MCC
Updater	MCC
Updater Verifier	MCC
Acknowledgement	MCC
W. P. Verifier	MCC

1700-8641

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JUN 19 PM 4:10

RECEIVED  
JUN 19 6 10 PM '98  
DIVISION OF CORPORATIONS

FA# 1441203

## 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:**

1. 1750 University L.C.  
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present. Please Note: L.L.C. is not an acceptable suffix in Florida.)
2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. applied for  
(FEI number, if applicable)
4. June 10, 1998  
(Date of Organization)
5. perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. June 10, 1998  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 617.155, F.S.))
7. 5730 S.W. 85th Street  
S. Miami, Florida 33143  
(Street address of principal office)
8. List and indicate in title space provided the name, title, and business address of each managing member[MGRM] or manager[MGR]. It is not necessary to list members.  
(attach additional page if necessary)

NAME &amp; ADDRESS:

TITLE:

NAME &amp; ADDRESS:

TITLE:

R-B Management Corp.Managing Director/MemberP.O. Box 431984Miami, FL 33243-1984Attn: L. Richard Mattaway

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 98 JUN 19 PM 4:10

**Filing Fee: \$ 52.50 for Application**

PAGE 1

*State of Delaware*  
*Office of the Secretary of State*

---

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "1750 UNIVERSITY, 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 TENTH DAY OF JUNE, A.D. 1998.

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JUN 19 PM 4:10



*Edward J. Freel*  
Edward J. Freel, Secretary of State

AUTHENTICATION:

9129869

DATE:

06-10-98

2906454 8300

981222815

KAF: 778-1100

**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 limited liability company is: 1750 University L.C.

2. The name and address of the registered agent and office is:

L. Richard Mattaway

(Name)

5730 S.W. 85th Street

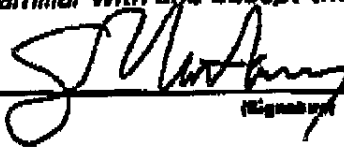
(P.O. Box or Mail Drop Box **NOT** acceptable)

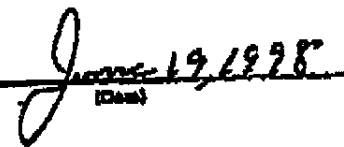
S. Miami, Florida 33143

(City/State/Zip)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JUN 19 PM 4:10

*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.*

  
(Signature)

  
(Date)

**Filing Fee: \$ 35 for Designation of Registered Agent**

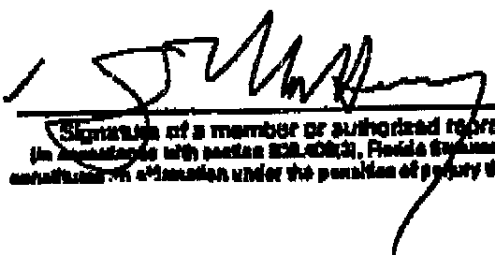
FAX: 1-781-111-1111

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

The undersigned member or authorized representative of a member of 1750 University L.C.

deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 750,000
- 3) if any, the agreed value of property other than cash contributed by member(s) is  
\$ 0. A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is  
\$ 750,000. This total includes amounts from 2 and 3 above.

  
Signature of a member or authorized representative of a member.  
(In accordance with section 820.02(3), Florida Statutes, the execution of this affidavit  
constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JUN 19 PM 4:10

Filing Fee: \$ 52.50 for Affidavit