8000000827 **Document Number Only** C T Corporation System. Requestor's Name 660 East Jefferson Street Address Tallahassee, FL 32301 600002604576--9 -07/31/98--01089--011 ****285.00 ****285.00 Phone Zip State City CORPORATION(S) NAME () Profit () Merge () Amendment () NonProfit CLimited Liability Company () MarkS () Dissolution/Withdrawal () Othe電 () Annual Report () Limited Partnership () Change of () Reservation () Reinstatement () Fictia () Limited Liability Partnership () CUS 운 () Photo Copies Certified Copy () After 4:30 () Call if Problem () Call When Ready 会 Pick Up () Will Wait Walk In PLEASENBETURN EXTRA COPY S) Avallability 7/31 AvaFill HtySTAMPED THANKS Document Examiner DocumpoEY Examiner Updater Updater Verifier Updater Acknowledg Verifyer Acknowledgement W.P. Verlier

CR2E031 (1-89)

W. P. Verifyer

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 BUSINESS IN THE STATE OF FLORIDA:

(Name of foreign limited liability compans so contained in the name at present.)	r	words "Ilmited company" or their abo	reviation "L.C." if not
(Jurisdiction under the law of which foreign company is organized)	n limited liability	77-0433900 FEI number, if app	•
4. July 18, 1996 (Date of Organization)	5	December 31, 2035 (Duration: Year limited liability conexist or "perpetual")	tpany will cease to
6. August 3, 1998 (Date first transacted business. 7. 551 Madison Avenue, 2n	ess in Florida. (See ad Floor	sections 608.501, 608.502, and 817.15	5, F.S.)
New York, NY 10022	(Street address of		
8. List name, title, and business address will manage the foreign limited liabil NAME & ADDRESS:	of each managi lity company in l	ng member[MGRM] or manager Florida: (attach additional page i NAME & ADDRESS:	r[MGR]who f necessary) - PH
William Georgas c/o Jotar, L.L.C. 551 Madison Ave.	MGRM	ADDRESS;	TITLE: 2:51
New_York, NY 1002	2.2		
	-		
	-		

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state 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.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of Johan J	. 1 . 0	
certifies:		
· ·		
1) the above named limited liability company has at least two members;		f
2) the total amount of each contributed by the member(s) is	\$ 3,000	
3) If any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.)	\$0	.;
 the total amount of each and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.) 	\$ 3,000	. -
Signature of a member or an authorized representative of a mem (In accordance with section 608,408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	1 ber. 98 JUL 3	DIVISION
Typed or printed name of ignee	_31 PM 2:51	FILED TARY OF STATE OF CORPORATION

Filing Fee: \$250.00 for Application and Affidavit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

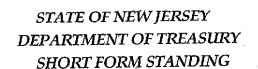
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	,
Jotar, L.L.C.	
2. The name and the Florida street address of the registered agent and office are:	9.9 9.0.1.0.1.0.1.0.1.0.1.0.1.0.1.0.1.0.1.0.
Jacqueline S. Miller	JUL SIGNET
(Namo)	S SET
c/o Chapin, Miller & Yudenfreund	— SYEE
Plorida street address (P.O. Box NOT ACCEPTABLE)	OF STATENS REPORATIONS PM 2: 51
Palm Beach FL 33480	5 DNS
Clty/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.

Signature)

Filing Fee: \$ 35 for Designation of Registered Agent



JOTAR, L.L.C.

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on July 18, 1996.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

William Georgas 190 Rt 4 East Paramus, NJ 07652

Continued on next page . . .



DEPARTMENT OF TREASURY
SHORT FORM STANDING

JOTAR, L.L.C.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 29th day of July, 1998

Jane le Dithentonie J.

James A DiEleuterio, Jr. Treasurer