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Requestor's Name 660 East Jefferson Street						
Address Tallahassee, FL 32301	222-1092					
City State Zip	Phone		400	00027	46184	3 -
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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. Casselberry Associates LLC				
(Name of foreign limited liability cor company" or their abbreviations "L.L	mpany must end C." or "L.C." if	with the words "limited liability co not so contained in the name at pre	ompany" or "limited sent.)	I
2.Delaware	- 3	. Applied For	•	
(Jurisdiction under the law of which company is organized)	foreign limited	liability (FEI number, if ap	plicable)	
4. January 15, 1999	5.	Perpetual	-	
(Date of Organization))	(Duration: Year limited liability cease to exist or "perpetual")	company will	
6. Opon Qualification (Date first transacted b	ousiness in Floric	la. (See sections 608.501, 608.502	and 817.155, F.S.)	_
7. c/\bar{o} The Colony Hotel, 155	Hammion Aven	ue, Palm Beach, Florida 3	33480	
	(Street add	lress of principal office)		•
8. List name, title, and business ac will manage the foreign limited	ldress of each I liability comp	managing member [MGRM] o pany in Florida: (attach additio	r manager [MGR onal page if neces	t] who ssary)
NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:	
See 1 in Addendum			<u> </u>	
			- :	
			 -	
				SECRETARY OF S IVISION OF CORPO
			_	TARY OF CO
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			<u> </u>	

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 hotocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

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:	
_	Casselberry Associates LLC	·
2.	The name and the Florida street address of the registered agent and office are:	D!
	C T CORPORATION SYSTEM	PILE INSIGN OF CO
	(Name)	SE SE
		19 PARY
	1200 South Pine Island Road	PH PH
	Florida street address (P.O. Box NOT ACCEPTABLE)	STAT ORAT
		TE TIONS 28
	Plantation FL 33324 (City/State/Zip)	w ·
	(City/state/Eip)	
liabi agen relai	ing been named as registered agent and to accept service of process for the above sto ility company at the place designated in this certificate, I hereby accept the appointn at and agree to act in this capacity. I further agree to comply with the provisions of ting to the proper and complete performance of my duties, and I am familiar with and gations of my position as registered agent.	nent as registerea all statutes
C T	CORPORATION SYSTEM	
	CONNIE BRYAN Consider Bruse SPECIAL ASSISTANT SECRETARY	
	(Signature)	

Filing Fee: \$35 for Designation of Registered Agent

ADDENDUM

- Martin L. Edelman
 c/o Battle Fowler LLP, 75 East 55th Street, New York, NY 10022
 MGR
- 2. John A. Cahill
 c/o Battle Fowler LLP, 75 East 55th Street, New York, NY 10022
 MGR
- 3. Robert C. Wetenhall c/o The Colony Hotel, 155 Hammon Avenue, Palm Beach, Florida 33480 MGRM

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

Th	e undersigned member or authorized representative of a member of	<u> </u>	
_	Casselberry Associates LLC certifies:		-
1)	the above named limited liability company has at least two members;		
2)	the total amount of cash contributed by the member(s) is	\$ 0.00	;
	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+	5
	and		
4)	the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$ <u>-o-</u>	·
	(This total metudes amounts from 2 and 3 above.)		
	John A laketh	99 JAN 19	SECRE
	Signature of a member or authorized representative of a member	er. =	육충필
	(In accordance with section 608.408(3), Florida Statutes, the execution of this		80T
	affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	72	25 C
	Stated herein are tide.)	$\ddot{\omega}$	ZŽ.
		28	<u> </u>
	John A. Cahill		्रक
	Typed or printed name of signee		

Filing Fee: \$250.00 for Application and Affidavit

State of Delaware

PAGE 1

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CASSELBERRY ASSOCIATES 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 EIGHTEENTH DAY OF JANUARY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE





Edward I. Freel, Secretary of State

AUTHENTICATION:

2993566 8300

DATE:

9525928

991019642

^{NIE:} 01-18-99