



THE UNITED STATES
CORPORATION
COMPANY

M99000000251

ACCOUNT NO. : 072100000032

REFERENCE : 142368 4303929

AUTHORIZATION : Patricia Pujols

COST LIMIT : \$ 346.25

ORDER DATE : February 22, 1999

ORDER TIME : 11:39 AM

ORDER NO. : 142368-005

CUSTOMER NO: 4303929

CUSTOMER: Esther J. Forbes, Legal Asst
Greenberg Traurig
1221 Brickell Avenue
20th Floor
Miami, FL 33131

M99-251

Name	Patricia Pujols
Availability	223
Document	CE
Examiner	CE
Checker	CE
Verifier	CE
Acknowledgment	CE
W. P. Verifier	CE

FOREIGN FILINGS

NAME: TRIVEST-CORVEST, LLC

800002784638--7

*****FILE FIRST*****

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 FEB 23 PM 1:43

RECEIVED
99 FEB 23 PM 12:13
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
DEPARTMENT OF STATE

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. TRIVEST-CORVEST, LLC

(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. February 19, 1999

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will
cease to exist or "perpetual")

6. Upon filing of application

(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 2665 South Bayshore Drive, Suite 800, Miami Florida 33133

(Street address of principal office)

8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who
will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:

TITLE:

NAME & ADDRESS:

TITLE:

Peter W. Klein
2665 South Bayshore Drive
Suite 800
Miami, FL 33133

MGRM

Troy D. Templeton
2665 South Bayshore Drive
Suite 800
Miami, FL 33133

MGRM

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DIVISION OF CORPORATIONS
99 FEB 23 PM 1:43

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

The undersigned member or authorized representative of a member of TRIVEST-CORVEST,
LLC deposes and says:

- 1) the above named limited liability company has at least members
- 2) the total amount of cash contributed by the member(s) is \$ 100.00
- 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
\$ 100.00 . This total includes amounts from 2 and 3 above.



Signature of a member or authorized representative of a member.
(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.)

PETER W. KLEIN, Authorized Signer

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 FEB 23 PM 1:43

Filing Fee: \$ 52.50 for 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, 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: TRIVEST-CORVEST, LLC

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

Peter W. Klein

(Name)

2665 S. Bayshore Drive, 8th Floor

(P.O. Box not acceptable)

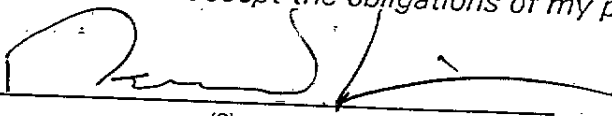
Miami, Florida 33133

(City/State/Zip)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 FEB 23 PM 1:14

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.

By: 
Name: Peter W. Klein (Signature)

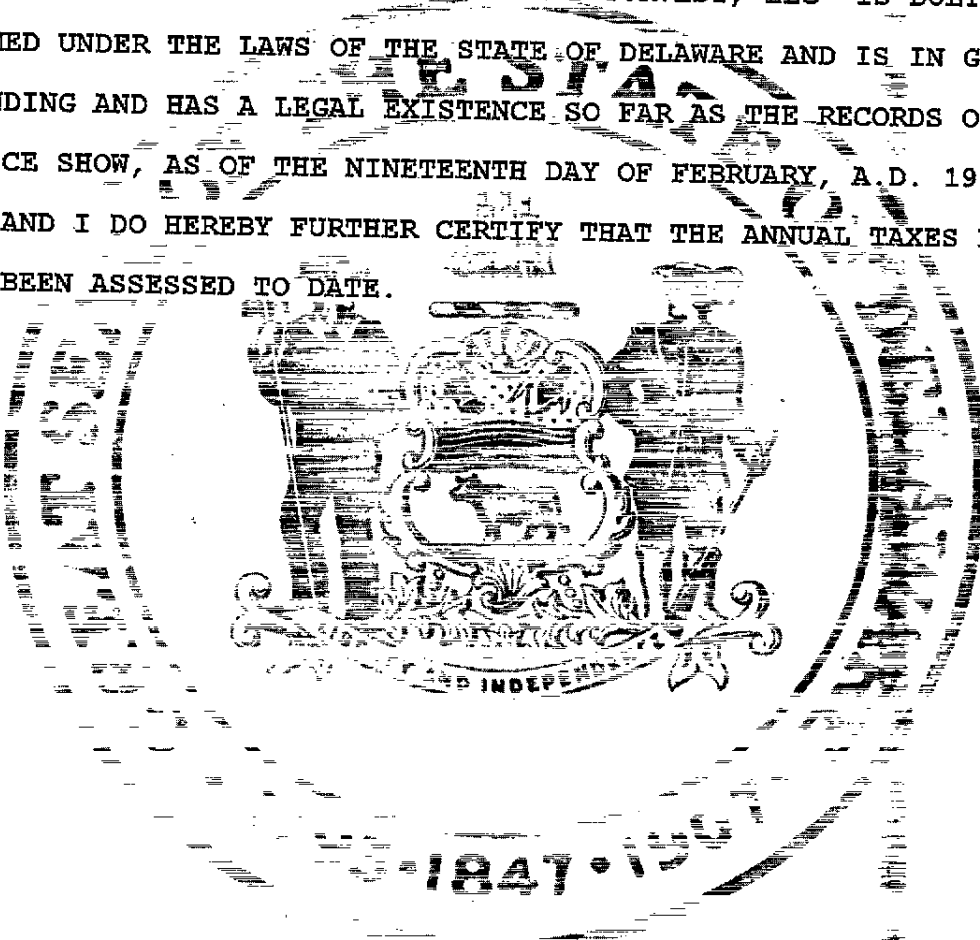
2/19/99
(Date)

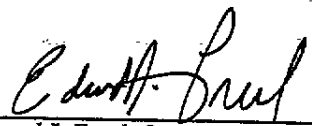
Filing Fee: \$ 35 for Designation of Registered Agent

State of Delaware
Office of the Secretary of State PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRIVEST-CORVEST, 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 NINETEENTH DAY OF FEBRUARY, A.D. 1999.

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





Edward J. Freel, Secretary of State

3007062 8300

991065645

AUTHENTICATION:

9587363

DATE:

02-19-99