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From:

Account Name : HOLLAND & KNIGHT OF MIAMI

Account Number : 072203000603 Phone : (305)374-8500 Fax Number : (305)789-7799 SECRETARY OF SIMIFORMS DIVISION OF CORPORATIONS

FOREIGN LIMITED LIABILITY COMPANY

ACP CYPRESS II LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$337.50
23,232,00	<u></u>

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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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ACP CYPRESS IT LLC (Name of foreign limited liability company must end with the words "limited company" or their abbreviatio so contained in the name at present.)	n "L.C." if not
2. Delaware (Jūrisdiction under the law of which foreign limited liability company is organized) 3. Applied For (FEI number, if applicable)	
4. 5/28/99 (Date of Organization) 5. Perpetual (Duration: Year limited liability companiests or "perpetual")	13/13/13/13
6. Upon Filling (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	部。FILE JUN -2
7. 701 Brickell Ave., Ste. 3000	PM -
Miami, FL 33131 (Street address of principal office)	Thous
 List name, title, and business address of each managing member[MGRM] or manager[MC will manage the foreign limited liability company in Florida: (attach additional page if necessary) 	R]who cessary)
NAME & ADDRESS: TITLE: NAME & ADDRESS:	TITLE:
ACP CYPRESS ALLIED CORP. MANAGING MEMBER	
701 Brickell Ave., Ste. 3000	-
Miami, FL 33131	
9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of Shaving custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the	State or the proper official certificate is in a foreign
language, a translation of the certificate under cash of the translator must be submitted.) This instrument was prepared by: Stuart K. Hoffman, Esq. FAX AUDIT: HS EL Bar # 0186851 C/O 701 Brickell Ave Ste 3000	99000013247 4
tel: 305-374-8500 Miami, FL 33131	
# #31: 305_789_7799 (MED)	FROM

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of ACP CYPRESS	II LIÇ
certifies:	<u>.</u>
1) the above named limited liability company has at least one member;	
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 (A description of the property is attached and made a part hereto.) 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>100.00</u> .
llear	SECRETARY OF SECRETARY OF CORP 99 JUN -2 PM
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.)	PM 1: 32
Stuart K. Hoffman	
Typed or printed name of signee	

FAX AUDIT H99000013247 4

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:			9		
	ACP CYPRESS II L	rc		- <u>يا</u>	USIO 1338
2. The n	ame and the Florida street address	of the registered	l agent and office are:	N-2 PM	ETARY OF OF CORP
INTRASTATE REGISTERED AGENT CORPORATION (Name)			1:32	STATE ORATIONS	
	701 Brickell Ave.,	Ste. 3000			Ψ.
	Florida street ade	dress (P.O. Box NO	<u>)T</u> ACCEPTABLE)	- .	•
	Mi ami,	FL_ City/State/Zip	33131	 . ·	

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.

INTRASTATE REGISTERED AGENT CORPORATION

Steven H. Hagen Vice President

FAX AUDIT H99000013247 4

Filing Fee: \$ 35 for Designation of Registered Agent

State of Delaware

PAGE

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ACP CYPRESS II 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 FIRST DAY OF JUNE, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACP CYPRESS II LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF MAY, A.D. 1999.

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

AUTHENTICATION:

9776270

991216894

3049350

DATE:

06-01-99

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