

REFERENCE :

334203

AUTHORIZATION

COST LIMIT :

\$ 285.00

ORDER DATE: August 6, 1999

ORDER TIME: 9:37 AM

ORDER NO. : 334203-005

000002953770--1

CUSTOMER NO: 4304990

CUSTOMER: Elizabeth Hanning, Legal Asst

Ropes & Gray

One International Place

Boston, MA 02110

CRIMSON LION ORLANDO, L.L.C.

QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

949-99

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 Crimson	Lion Orlando, L.L.C.		<u> </u>	
(Name of foreig so contained in	m limited liability company must the name at present.)	end with the wo	ords "limited company" or their abbre	viation "L.C." if not
2 Delaware		3.	04-3478320	
	der the law of which foreign limit		(FEI number, if applic	cable)
4. July 30,	1999	5.	Perpetual.	
	Date of Organization)	_ 	(Duration: Year limited liability co exist or "perpetual")	mpany will cease to
6. Upon Fil			<u> </u>	
0	(Date first transacted business in	Florida. (See se	ections 608.501, 608.502, and 817.15	5, F.S.)
7. c/o Roj	pes & Gray			
		.on WA 021	10	
One In	ternational Place, Bost			
	(5	Street address of	principal office)	
will manage t	the foreign limited liability	company in F	g member[MGRM] or manage lorida: (attach additional page i	f necessary)
NA	AME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
NA	AME & ADDRESS:	·		
NA -	-	TITLE:		
-	AME & ADDRESS: Jonathan Lavine c/o Ropes & Gray One International Place	TITLE:		
-	ME & ADDRESS: Jonathan Lavine c/o Ropes & Gray	TITLE:		
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-	AME & ADDRESS: Jonathan Lavine c/o Ropes & Gray One International Place	TITLE:		FIL 99 AUG -9 SLONDTARY IALLAHASSE
-	AME & ADDRESS: Jonathan Lavine c/o Ropes & Gray One International Place	TITLE:		FILE: 99 AUG -9 SLORETARY ALLAHASSE
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-	AME & ADDRESS: Jonathan Lavine c/o Ropes & Gray One International Place	TITLE:		FILE: 99 AUG -9 SLORETARY ALLAHASSE
-	AME & ADDRESS: Jonathan Lavine c/o Ropes & Gray One International Place	TITLE:		FILE: 99 AUG -9 SLORETARY ALLAHASSE

^{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	
Trion Orlando, IIC. certifies:	
1) the above named limited liability company has at least one member;	
2) the total amount of cash contributed by the member(s) is	\$;
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	\$ <u>~~0~</u> ;
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>-25,000-</u> .
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.)	ber.
Walter R McCabe, III (Authorizal Repre	sattir)

Filing Fee: \$250.00 for Application and Affidavit

99 AUG -9 PM 1: 34
SECTION OF STATE
TALLAHASSEE, FLOREN

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:
	Crimson Lion Orlando, L.L.C.
2.	The name and the Florida street address of the registered agent and office are:
	Corporation Service Company (Name)
	Florida street address (P.O. Box NOT ACCEPTABLE)
	Tallahasee FL 32301 City/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.

Muthure Janleblane Last V/P
(Signature)

PILED 99 AUG -9 PH 1: 34 SECRETARY OF STATE

Filing Fee: \$ 35 for Designation of Registered Agent

State of Delaware

Office of the Secretary of State PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRIMSON LION ORLANDO, L.L.C." 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 SECOND DAY OF AUGUST, 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

9897395

3075502 8300 AUTHENTICATION:

991316368

DATE: 08-02-99