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CORPORATI	ON(S) NAME			
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CR2E031 (1-89)

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:

mpany" or their abbreviations "I Delaware		3 69	5-093364	-	
risdiction under the law of whi mpany is organized)	ch foreign limited	lliability	(FEI number, if app	licable)	
7–9–99	5	5	Perpetual		
(Date of Organizatio	n)	(Duration: Yea	r limited liability co r "perpetual")	ompany wili	
Upon Qualification					•
(Date first transacted	business in Flori	da. (Sco sections	608,501, 608,502 a	nd 817.155, F	.S.)
433 Cadagua Aver	nue				
Coral Gables, Fl	orida 33146				
st name, title, and business	(Street add	dress of principal or managing mem pany in Florida:	her IMGRMI or :	manager [M al page if ne	GR] who
st name, title, and business	(Street add	managing mem	ber [MGRM] or a (attach addition	manager [M al page if ne TITLE:	GR] who
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st name, title, and business a ll manage the foreign limite NAME & ADDRESS:	(Street address of each d liability comp	managing mem pany in Florida: NAME & A Bruce St	ber [MGRM] or a (attach additional	al page if ne	GR] who
st name, title, and business a ll manage the foreign limite NAME & ADDRESS: Robert Rose	(Street address of each d liability comp	managing mem pany in Florida: NAME & A Bruce St 7014 Whi	ber [MGRM] or a (attach addition) ADDRESS: ephens	al page if ne	GR] who seessary)
st name, title, and business all manage the foreign limite NAME & ADDRESS: Robert Rose 433 Cadagua Avenue	(Street address of each d liability comp	managing mem pany in Florida: NAME & A Bruce St 7014 Whi	aber [MGRM] or a (attach addition) ADDRESS: cephens pple Avenue	al page if ne	GR] who SECWET
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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 eath 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.

The name of	the Limited Liability Company is:
	Stephens & Rose, L.L.C.
The name and	the Florida street address of the registered agent and office are:
	Robert E. Rose (Name)
	433 Cadagua Avenue Florida street address (P.O. Box NOT ACCEPTABLE)
	Coral Gables, FL 33146 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.

(Signature)

Filing Fee: \$35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of <u>Stephens & Rose, L.L.C.</u> certifies:

- the above named limited liability company has at least one member;

 14,000

 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.)
- the total amount of cash and property contributed and anticipated to be contributed by member(s) is

14,000

Signature of a member or an 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.)

(This total includes amounts from 2 and 3 above.)

Robert E. Rose

Typed or printed name of signee

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Filing Fee: \$250.00 for Application and Affidavit

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STEPHENS & ROSE, 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 TWENTY-THIRD DAY OF AUGUST, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE



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991351459



Edward J. Freel, Secretary of State 9936173

AUTHENTICATION:

08-24-99

DATE: