

STATE of DELAWARE
AMENDED AND RESTATED
CERTIFICATE of FORMATION

Of _____

This filing has been executed and filed in accordance with
Section 18-208 of the Limited Liability Company Act. This document is being executed for the
purpose of amending and restating the original Certificate of Formation, filed on _____ under
file number: _____.

FIRST: The name of the limited liability company is
_____.

SECOND: The address of its registered office in the State of Delaware is 113
Barksdale Professional Center in the City of Newark, County of New Castle. Zip
code, 19711-3258. The name of its Registered Agent at such address is Delaware
Intercorp, Inc.

THIRD: The members agree to be bound by the signed Limited Liability Company
Agreements except as they may be contradicted by the Limited Liability Company Act
of the State of Delaware.

FOURTH: (insert your text here)

In Witness Whereof, the undersigned has executed this Amended and Restated
Certificate of Formation of _____ this
_____ day of _____, 20__.

Signed: _____

Name: _____

Title: _____