Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000058247 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tot

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)222-9428

Fax Number	: (850)222-9428		
FOREIGN	LIMITED LIA Hisleah Industr	BILITY COP	MPA
Cen	tificate of Status	1	1
	tified Copy	1	
Pag	e Count	04	
	mated Charge		

THOUSENS THE MODE

COMPRESSOR

₹

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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.41	KILLY DIGITAL COLUMN THE ACTION OF THE PROPERTY OF THE PROPERT	
1.	Hislesh Industrial, LLC (Name of Foreign Limited Liability Company)	
2.	De Laware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4.	March 3, 2005 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	March 17, 2005 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	•
7.	Two Seaport Lane, Boston, MA 02210 (Street Address of Principal Office)	
	If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows:	
	Federal Street Operating, LLC	
	c/o AEW Capital Management, L.P., World Trace Center East,	
	Two Seaport Lane, Boston, MA 02210	- <u>-</u>
the,	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of accords it institution under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, and station of the certificate under onth of the translator must be submitted.)	in
11.	Nature of business or purposes to be conducted or promoted in Florida: Own, improve, develop,	
,	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an authorized the penalties of perjury that the facts stated herein are true.) Joseph J. Christian - Authorized Representative	
Pr.D	Typed or printed pame of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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.

	idustrial, LLC			
2. The name and t	he Florida street address	of the registered a	gent and office are	:
	ci	F Corporation System		
		(Name)		
	1200	South Pine Island Ro	ad	
	Florida Street Ado	iress (P.O. Box <u>NOT</u>	ACCEPTABLE)	
	Plantation	FL	33324	
		City/State/Zip		
Having been named	l as registered agent and i	lo accept service of	process for the abo	ve stated limited
liability company at agent and agree to c relating to the prope	l as registered agent and i t the place designated in t act in this capacity. I furt er and complete performa osition as registered agen	his certificate, I her ther agree to compl tnce of my duties, a	reby accept the apport y with the provision and I am familiar wit	ointment as registered s of all statutes th and accept the
liability company at agent and agree to a relating to the propeobligations of my po	t the place designated in the capacity. I further and complete performation as registered agenty. The Corporation System	his certificate, I hes ther agree to compl ince of my duties, a t as provided for in	reby accept the apport y with the provision and I am familiar wit	ointment as registered s of all statutes th and accept the da Statutes.
liability company at agent and agree to a relating to the propeobligations of my po	t the place designated in the capacity. I further and complete performation as registered agenty. The Corporation System	his certificate, I her ther agree to compl ince of my duties, a t as provided for in	reby accept the apport y with the provision and I am familiar wit	intment as registered is of all statutes the and accept the da Statutes.
liability company as agent and agree to a relating to the prope obligations of my po	t the place designated in the capacity. I further and complete performance it is completed agent to the comporation System TRA SPECIAL ASS.	his certificate, I hes ther agree to compl ince of my duties, a t as provided for in	reby accept the apport y with the provision and I am familiar wit	intment as registered is of all statutes the and accept the da Statutes.
liability company at agent and agree to a relating to the prope obligations of my po	t the place designated in the capacity. I further and complete performance it is completed agent to the comporation System TRA SPECIAL ASS.	his certificate, I hes ther agree to compl ince of my duties, a t as provided for in	reby accept the apport y with the provision and I am familiar wit	ointment as registered is of all statutes the and accept the da Statutes. TALLAHASSEE, T
liability company at agent and agree to a relating to the prope obligations of my po	t the place designated in the capacity. I further and complete performance it is completed agent to the comporation System TRA SPECIAL ASS.	this certificate, I her ther agree to comple ince of my duties, a t as provided for in ACI HOUCK ISTART SECRETARY Filing Fee for A	reby accept the appe by with the provision and I am familiar wit Chapter 608, Flori	ointment as registered s of all statutes th and accept the da Statutes. TALLAHASSEE

Delaware

PAGE 1

The First State

I, HARRIET SMITE WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HIALEAH INDUSTRIAL, LLC" IS DOLY 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 FOURTH DAY OF MARCH, A.D. 2005.

3051 8300

3933051 8300 050184979 Warriet Smith Hindson.

AUTHENTICATION: 3720846

DATE: 03-04-05