Florida Department of State

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN I ÉMITED LIABILITY CO.

Everest PP2 FX 1 GP, L.L.C.

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA SECRETARY OF STATE

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECESSIER ACTORISMS LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Everest PP2 FX1 GP, L.L.C. (Name of Foreign Limited Liability Company) 2 Delaware 3. Applied for (Jurisdiction under the law of which foreign limited liability ocmpany is organized) (FEI mumber, if applicable) 12/29/05 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) 6. N/A (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 1200 N. Ashland Avenue, Suite 600, Chicago, Illinois 60622 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Everent PP2 FX1, L.L.C. - Manager, 1260 N. Ashland Avenue, Suite 600, Chicago, Illinois 50622 Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction 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.). 11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Investments Signature of a member or an anthorized representative of a member. (hi accordance with section 608,408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

chael W. Husman,

Typed or printed name of signce

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CERTIFICATE OF DESIGNATION OF SECRETARY OF STATE 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	f the Limited Lizbility Company is:	
Bverest PP2 FX1	GP, L.L.C.	
	V.1	
2. The name an	nd the Florida street address of the registered	agent and office are:
	C T Corporation System	on,
	(Name)	
	1200 South Pine Island R	
	Florida Street Address (P.O. Box. NO	TACCEPTABLE)
	Plantation, Florida 3332	24
	City/State/Zip	
	%!%	•
liability company agent and agree relating to the pr	med as registered agent and to accept service by at the place designated in this certificate, I h to act in this capacity. I further agree to com- roper and complete performance of my duties, by position as registered agent as provided for	vereby accept the appointment as registered ply with the provisions of all statutes and I am familiar with and accept the
Ву:	CT Corporation System James M. I (Signature) Assistant Se	
	() (Signature) Assistant co	

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF STATE OF THE STATE OF FLORIDA DELAWARE, DO BEREBY CERTIFY "EVEREST PP2 FX1 OP, 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 THIRD DAY OF JANUARY, A.D. 2006.

AND I DO HEREST FURTHER CERTIFY THAT THE AMOUNT TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO BERREY FURTHER CERTIFY THAT THE SAID "EVEREST PP2 FX1 GP, L.L.C." WAS FORMED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2005.

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4086385 8300 060004213 Graniet Smith Hindren

AUTHENTICATION: 4419859

DATE: 01-03-06