

M09000002617

Florida Department of State
Division of Corporations
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L. SELLERS

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From: Account Name : C T CORPORATION SYSTEM
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EXAMINER

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LIMITED LIABILITY REINSTATEMENT
RT INGENUITY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$238.75

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M09000002517					
1. Limited Liability Company's Name RT INCENUITY, LLC					
2. Principal Office Address - No P.O. Box # 17 Hulfish Street		3. Mailing Office Address 515 S. Flower Street			
Suite, Apt. #, etc. Suite 280		Suite, Apt. #, etc. Suite 3100			
City & State Princeton		City & State Los Angeles, CA			
Zip 08542	Country USA	Zip 90071	Country USA		
4. State/Country of Formation Delaware					
5. Date Organized or Qualified To Do Business in Florida 06/29/2009					
6. FEI Number 27-0321823					Applied For <input type="checkbox"/>
					Not Applicable <input type="checkbox"/>
7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 per year fee required for a Certificate of Status					
5. Name and Address of Current Registered Agent					
Name C T Corporation System					
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road					
Suite, Apt. #, Etc.					
City Plantation		State FL	Zip Code 33324		
9. I, being appointed the registered agent of the above named limited liability company, hereby accept the obligations of Chapter 608, P.S. Signature of Registered Agent <u><i>Connie Bryan</i></u> Assistant Secretary Date <u><i>12/10/2010</i></u> REGISTERED AGENT					
10. Names and Street Addresses of Managing Members/Managers					
Titles	Name of Managing Member/Manager		Street Address of Each Managing Member/Manager		City / State / Zip
MGRM	CBRE Operating Partnership, L.P.		17 Hulfish Street, Suite 280		Princeton, NJ 08542
REINSTATEMENT <i>2010</i>					
11. E-mail Address: <u><i>DChaparr@chreinvestors.com</i></u> (To be used for future annual report notifications)					
12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
Signature of Managing Member/Manager <u><i>Charles W. Hessel</i></u>		Date 12/9/2010		Daytime Phone # 608-683-4900	
Typed or printed name of signing Managing Member/Manager		Charles W. Hessel, Vice President of CBRE Operating Partnership, L.P.			