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FLORIDA/FOREIGN LIMITED LIABILITY CO. RT Miramar I, LLC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$125.00

D. BRUCE

DEC 2 3 2009

EXAMINER

COVER LETTER

:

	vision of Corporations			
SUBJECT	RT MIRAMAR I, LLC			
	(Name o	f Limited Liability Company)		
Florida," C		ed Liability Company for Authorization to Tran are submitted to register the above referenced folial.		
Please retur	rn all correspondence concerning t	this matter to the following:		
	Cindy Sabish			
		(Name of Person)		
	K&L Gates LLP		F (2)	<u> </u>
	 -	(Firm/Company)	A	
	535 Smithfield Street, Oliv	ver Building	ISSVII VARA	
		(Address)		RIT
	Pittsburgh, PA 15222		STAT	
	(Ci	ity/State and Zip Code)	Da r	S
For further	information concerning this matte	r, please call:		
Laboration 1		at ()		
	(Name of Person)	(Area Code & Daytime Telephone N	umber)	
Div P.O.	ILING ADDRESS: iston of Corporations . Box 6327 lahussee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	a check for the following amount 125.00 Filing Fee \$\square\$\$ \$\square\$\$ \$130.00 Filing F Certific	Fee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing f	fee, Certificat us & Certifica	

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:

RT Miramar I, LLC	
(Name of Foreign Limited Liability Company; must inclu	ude "Limited Liability Company," "L.L.C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpo consent of the managers or managing members adopting the alte Company," "L.L.C.," "LLC.")	ise of transacting business in Florida and attach a copy of the written streams. The alternate name must include "Limited Liability
_{2.} Delaware	3.
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 11-13-2009	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
5. Upon filing	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	. to determine penalty liability)
7. 17 Hulfish Street, Suite 280, Princeton, NJ	08542 AN E -
	ASS
(Street Address	
8. If limited liability company is a manager-managed	company, check here 🔲 💢 🚐 🦵
9. The name and usual business addresses of the man	aging members or managers are as follows:
CBRE Operating Partnership, L.P.	>
17 Hulfish Street, Suite 280 Princeton, NJ	08542
10. 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 photocop translation of the certificate under cath of the translator must be sub-	y is not acceptable. If the certificate is it a loreign targetage, a mitted.)
11. Nature of business or purposes to be conducted or	
	i promoted in Pionas.
Own, operate and manage properties	
	MB
(In accordance with section 608,408(3), F	thorized representative of a member.
an affirmation under the penalties of perj	ury that the facts stated herein are true)
Charles Hessel, Vice Presi	ident and Authorized Representative

Typed or printed name of signee

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.

	ne of the Limited Liability Co	ompany is:	
If name un	available, the alternate name	to be used in the state of Florida is:	
2. The name	ne and the Florida street addr	ess of the registered agent and office are:	09 DE
	C T Corporation Sys	stem	DEC 22 CRETARY AHASSI
		(Name)	SSE N
1200 South Pine Island Road		AM IO: 12 OF STATE E. FLORID	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		ORI -	
	Plantation	FL 33324	Dri 2
		Čity/Štate/Zip	
liability con agent and a relating to obligations C T Corp	npany at the place designated tgree to act in this capacity. I the proper and complete perfo of my position as registered a	and to accept service of process for the above stain this certificate, I hereby accept the appointm further agree to comply with the provisions of a rmance of my duties, and I am familiar with an agent as provided for in Chapter 608, Florida Stannie Bryan	nent as registered all statutes ed accept the

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

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RT MIRAMAR I, LLC" 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-FIRST DAY OF DECEMBER, A.D. 2009.

AND I DO BEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

091123728

DATE: 12-21-09