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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Fax Number

: (850)878-5368

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

Email	Address:	•			

Foreign Limited Liability Company 2000 Rosecliff Circles LLC

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

J. BRYAN

JUL -1 2010

COVER LETTER

TO:		stration Section ion of Corporations			
SUBJ	ECT:	2000 Rosecliff Circles	LLC		_
		(Na	me of Lim	nited Liability Company)	
Florid	a," Cei	Papplication by Foreign L tificate of Existence, and cl pany to transact business in	heck are si	ability Company for Authorization t ubmitted to register the above refere	o Transact Business in inced foreign limited
Please	return	all correspondence concern	ning this n	natter to the following:	
					TASE TO
			(Na	ame of Person)	JUN 30 AM 8: 06 CRETARY OF STATE CARASSEE. FLORIE
		Centerline			黎二丁
			(Fir	rm/Company)	
		625 Madison Avenu	e, 5th Fl	oor	TATE ORNOR
				(Address)	· •
		New York, NY 1002	22		
			(City/St	ate and Zip Code)	
For fu	rther in	formation concerning this i	matter, ple	ease call:	
				at ()	
		(Name of Person)		(Area Code & Daytime Teleph	ione Number)
		ING ADDRESS:		STREET ADDRESS:	
		on of Corporations 3ox 6327		Division of Corporations Clifton Building	
		assee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301	
		check for the following am 5.00 Filing Fee \$130.00 Filing C			Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIBELITY COMPANY TO TRANSACT BUSINESS IN THIS STATE OF FLORIDA.

LIMITED LIBBILITY COMPANY TO TRANSACT BUSINESS IN THE S	TIMTE OF FLORIDA:
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company, ""L.L.C.," "LLC.")	of transacting business in Florida and attach a copy of the written ate name. The alternate name must include "Limited Liability
_{2.} DELAWARE 3.	PENDING
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 06/21/2010	PERPETUAL
(Date of Organization)	Ourstian Vacaling tal lighting agreement will accept to
6. N/A	L COR
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	idn, if prior to registration.) o determine penulty liability)
625 Madison Avenue, 5th Floor	exist or "perpetual") Idn, if prior to registration.) o determine penulty liability)
New York, NY 10022	exist or "perpetual") Idn, if prior to registration.) o determine penulty liability) Principal Office)
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed c	ompany, check here 🗵
9. The name and usual business addresses of the manag	ging members or managers are as follows:
Centerline Guaranteed Manager Ll	· · · · · · · · · · · · · · · · · · ·
625 Madison Avenue, 5th Floor, N	
023 14110111111111111111111111111111111111	1011 1011
· · · · · · · · · · · · · · · · · · ·	
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is pansiation of the certificate under oath of the translator must be submit	s not acceptable. If the certificate is in a foreign language, a
 Nature of business or purposes to be conducted or p 	promoted in Florida
Real estate investment	
Real estate investment	W-
	output varyagan(ativa of a manulus)
(In accordance with section 608.408(3), F.S.	
an affirmation under the panelties of patjury of the form of the Breef	than the there shaled notes are true)
Typed or printed n	ame 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.

1. The name of the Lim 2000 Rosecliff (y is:			
If name unavailable, the	alternate name to be u	sed in the state of	Florida is:		
2. The name and the Flo	orida street address of t	the registered ager	at and office are:	FEE T	
	C T Corporation System				
	1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation	FL	33324	Ć.	
		City/State/Zip			

Flaving been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

S 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 "2000 ROSECLIFF CIRCLES 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-NINTH DAY OF JUNE, A.D. 2010.

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

4839112 8300

100702151

renrey W. Bullack, Secretary of State TION: 8086338

DATE: 06-29-10