1000002578 Florida Department of State

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Account Name : C T CORPORATION SYSTEM

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

1450 Executive Circle NE - Melbourne LLC

Certificate of Status	0
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JUN - 2 2008

EXAMINER

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Help

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;

iany is organized)	umber, if applicable)
any is organized)	imber if annicohie)
28, 2008 pernetual	amoet, ii appiitable)
5. perperusi	
(Date of Organization) (Duration: Year limexist or "perpetual"	iked liability company will cease to)
(Date first transacted business in Plorida, If prior to registrat	tion.) $\sum_{i} c_{i}$
(See sections 608.501 & 608.502 F.S., to determine penalty lis	΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄
iStar-Financial Inc.,-1414-Avenus of the Americas, 39th Floor, New York, NY-H	
	1AR ASS
(Street Address of Principal Office)	
imited liability company is a manager-managed company, check her	re ☐ AM 8:
e name and usual business addresses of the managing members or m	nanagers are as follows: 🦞
tostar Realty Operating Partnership LP	η, ω
iStar Financial Inc., 1114 Avenue of the Americas, 39th Floor, New York, NY 1	0036
	*
ached is an original certificate of existence, no more than 90 days old, duly authenticate	ed by the official, having custody of records i
diction under the law of which it is organized. (A photocopy is not acceptable. If the	
on of the certificate and the fitter translator crass be submitted.)	
ature of business or purposes to be conducted or promoted in Florida	a:
Batate Investments and Pinance	
M. M. M.	
ary / V	
Signature of a member of an authorized representation of the section 608,408(3). P.S., the execution of this do	ocument constitutes
an afformation under the penalties of perjory that the facts stated her	rein sie true.)

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.

	DA,	· · · · · · · · · · · · · · · · · · ·
1. The	name of the Limited Liability Company is:	
1450 Exc	cutive Circle NB - Melbourne LLC	•
If name	unavailable, the alternate name to be used in the state of Florida is:	and all the property of the common and annual
2. The	name and the Florida street address of the registered agent and office are:	2008 SEO TALL
	C T Corporation System	
	(Namo)	
	1	IN -2
	1200 South Pine Island Road	HIC.
	Plorida Street Address (P.O. Box NOT ACCEPTABLE)	[CA
		8: 5: 0RID
	Plantation FL 33324	53 53
	City/State/Zip	
liability agent an relating	been named as registered agent and to accept service of process for the above sto company at the place designated in this certificate, I hereby accept the appointm nd agree to act in this capacity. I further agree to comply with the provisions of a to the proper and complete performance of my duties, and I am familiar with and ons of my position as registered agent as provided for in Chapter 608, Florida Sto & T Corporation System	ent as registered ill stanutes i accept the
liability agent an relating	company at the place designated in this certificate, I hereby accept the appointment agree to act in this capacity. I further agree to comply with the provisions of a to the proper and complete performance of my duties, and I am familiar with ancons of my position as registered agent as provided for in Chapter 608, Florida States of T Corporation System.	ent as registered ill stanutes i accept the
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liability agent an relating obligatio	company at the place designated in this certificate, I hereby accept the appointmed agree to act in this capacity. I further agree to comply with the provisions of a to the proper and complete performance of my duties, and I am familiar with anciens of my position as registered agent as provided for in Chapter 608, Florida States of T. Corporation System (Signature) \$ 100.00 Filing Fee for Application	ent as registered ill stanutes i accept the
liability agent an relating obligatio	company at the place designated in this certificate, I hereby accept the appointmed agree to act in this capacity. I further agree to comply with the provisions of a to the proper and complete performance of my duties, and I am familiar with anciens of my position as registered agent as provided for in Chapter 608, Florida St. CT Corporation System (Signature)	ent as registered ill stanutes i accept the

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "1450 EXECUTIVE CIRCLE NE - MELBOURNE 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 THIRTIETH DAY OF MAY, A.D. 2008.

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

2008 JUN -2 AM 8: 53
SECRETARY OF STATE
TALLAHASSE PERSTATE

4553601 8300

080640261

You may worify this certificate online at corp.delaware.gov/authwer.shtml

Daniel Smile Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6625900

DATE: 05-30-08