

#B/2000000196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

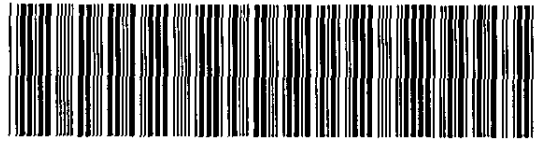
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*File  
2nd*

Office Use Only



300237807913

FILED  
12 AUG 30 AM 10:05  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
12 AUG 30 PM 1:57

K. SALY  
EXAMINER  
SEP - 4 2012



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 31, 2012

CSC / STEPHANIE MILNES

SUBJECT: CLPF - NBV, L.P.  
Ref. Number: W12000045310

**RESUBMIT**  
Please give original  
submission date as file date.

File 2nd  
please ☺

We have received your document for CLPF - NBV, L.P. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 912A00022242

RECEIVED  
12 AUG 31 PM 4: 21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 331817 4304394

AUTHORIZATION

*Spuddean*

COST LIMIT : \$ 1008.75

ORDER DATE : August 30, 2012

ORDER TIME : 12:36 PM

ORDER NO. : 331817-010

CUSTOMER NO: 4304394

FOREIGN FILINGS

NAME: CLPF - NBV, L.P.

*File 2nd  
please  
sm*

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER: \_\_\_\_\_

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

FILED  
12 AUG 30 AM 10:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. CLPF.- NBV, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware

State or Country of Formation

3. August 17, 2012

Date of Formation

4. Federal Employer Identification Number: \_\_\_\_\_

5. Name of Registered Agent for Service of Process and Florida Street Address:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

6. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: Stephanie Wilmes Asst. V.P.

Signature of Registered Agent

7. Principal Office:

230 Park Avenue, 12th Floor

New York, New York 10169

8. Mailing Address:

230 Park Avenue, 12th Floor

New York, New York 10169

9. If limited partnership is a limited liability limited partnership, check box

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: CLPF - NBV GP, LLC

Name of General Partner: \_\_\_\_\_

Street Address: 230 Park Avenue, 12th Floor

Street Address: \_\_\_\_\_

New York, New York 10169

Mailing Address: 230 Park Avenue, 12th Floor

Mailing Address: \_\_\_\_\_

New York, New York 10169

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

11. Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this \_\_\_\_\_ day of August, 2012.

--- REFER TO ATTACHED PAGE FOR SIGNATURE ---

\_\_\_\_\_  
Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

<b>Filing Fees:</b>	<b>\$1,000.00</b> (\$965 Filing Fee and \$35 Registered Agent Fee)
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

**SIGNATURE PAGE**

**TO**

**FOREIGN LP AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

The individual signing this document affirms that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Date: August 29, 2012

CLPF – NBV, L.P.

By: CLPF – NBV GP, LLC, its general partner

By: Clarion Lion Properties Fund Holdings, L.P.,  
its sole member

By: CLPF-Holdings, LLC  
its general partner

By: Clarion Lion Properties Fund Holdings REIT,  
LLC, its sole member

By: Clarion Lion Properties Fund, LP.  
its managing member

By: Clarion Partners LPF GP, LLC, its general  
partner

By: Clarion Partners, LLC, its sole member

By: \_\_\_\_\_

Name:

Title: Authorized Signatory

**Marc C. DeLuca**  
**Authorized Signatory**

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CLPF - NBV, L.P." 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 SEVENTEENTH DAY OF AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLPF - NBV, L.P." WAS FORMED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2012.

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

5200298 8300

120947875

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 9788500

DATE: 08-17-12