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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : GREENBERG TRAURIG (WEST PALM BEACH)

Account Number : 075201001473

Phone

: (561)650-7900

Fax Number

: (561)655-6222

FOREIGN LIMITED LIABILITY COMPANY

1864 17th Street, Sarasota, Florida, LLC

Certificate of Status	I	
Certified Copy	1	
Page Count	02	
Estimated Charge	\$160.00	

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:

1.	1864 17th Street, Sarasota, Florida, LLC	
	(Name of foreign limited liability company)	_
2.		≘
4.	(Date of Organization) (Duration: Year limited liability company 2011	71 SIN
6.	upon qualification (Date first transacted business in Florida. (See sections 608 501, 608 502, and 817.155, F.S.)	<u>₹</u>
7.		-
	New York, NY 10004	-
	(Street address of principal office)	-
8.	If limited liability company is a manager-managed company, check here	
9.	The usual business address of the managing members or managers are as follows:	
	c/o Urban America, L.P., 30 Broad Street, 31st Floor	
	New York, NY 10004	
10. 11.	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 photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)	
14.	Nature of business or purposes to be conducted or promoted in Florida: to engage in any act or	
	activity for which limited liability companies may be organized under the Florida Limited	
	Liability Company Act.	
	Signature of a methodor of an authorized representative of a member. (In accordance with section 608.408(3), F.S., indexecution of this document constitutes an affirmation under the penalties of penjury that the facts stated herein are true.) Hal Reiff Typed or printed name of signee	
	* 3 hard on lumined untiles of Affilies	

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 Limited Liability Company is: 1864 17th Street, Sarasota, Florida, LLC	SECRETAR TALLAHASS	90 VNC -+
2.	The name and the Florida street address of the registered agent and office are: Michael J. Sabatello, Esq.	Y OF STAT	PH 12:
	(Name) 777 S. Flagler Drive, Suite 300E Florida street address (P.O. Box NOT ACCEPTABLE)	ABA	13
	West Palm Beach FL 33401 City / State / Zip		

Having 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, F.S..

Michael J. Sabajello

\$100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "1864 17TH STREET, SARASOTA, FLORIDA, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO

FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF AUGUST, A.D. 2000.

3269228 8300

001392327

AUTHENTICATION: 0599417

DATE:

08-03-00