

ACCOUNT NO.

072100000032

REFERENCE: 989951 4304990

AUTHORIZATION

\$ 130.00 COST LIMIT

ORDER DATE: February 5, 2001

ORDER TIME: 9:42 AM

ORDER NO. : 989951-005

600003653846--4

CUSTOMER NO: 4304990

CUSTOMER: Melissa Kaufman, Legal Asst

Ropes & Gray

One International Place

Room 569

Boston, MA 02110-2624

FOREIGN FILINGS

NAME:

RESIDENTIAL PROPERTY GP,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 1156

**EXAMINER:** 

# 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:

	<u>sidential Property GP, LL</u> (Name of	f foreign limited	l liability company)	
isdiction und apany is orga	aware ler the law of which foreign limited l nized)	liability	(FEI number, if a	oplicable)
1/11/(	)1 Date of Organization)	_ 5	Perpetual Duration: Year limited liabilitexist or "perpetual")	y company will cease to
Upon i	illing (Date first transacted business in Flo	orida (See secti	ons 608 501 608 502 and 815	7 155 F.S.)
	clantic Avenue			-
Bosto	n, Massachusetts 02210	at addrage of an	ncipal office)	
	(Succe	et address of pri	norpar office)	
f limited lia	bility company is a manager-m	nanaged com	pany, check here 🗓	
The name ar	ad usual business addresses of	the managing	g members or managers a	re as follows:
Harva:	d Private Capital Realty	7. Inc.		
600 A	lantic Avenue		<del>-</del> –	
			· · · · · · · · · · · · · · · · · · ·	
Bosto	n, MA 02210	- <u>-</u>		
	original certificate of existence, no mo	•		<u> </u>
	er the law of which it is organized. (A	unhotocony is no	ot acceptable. If the certificate is	sin a foreion lanouage a
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urisdiction und slation of the ce	stificate under oath of the translator measurements or purposes to be conducted as a signature of a member (In accordance with section) 60%	ducted or pro  Or an authori 18.408(3), F.S., th	moted in Florida:Inve	stments  7 Sicolary States States

# 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:					
	Residential Property GP, LLC					
2.	. The name and the Florida street address of the registered agent and office are:					
	Course Course de Company					
Corporation Service Company (Name)						
	1201 Hays Street					
Florida street address (P.O. Box NOT ACCEPTABLE)						
	Tallahassee FL 32301					
	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..

Maureen Culla (Signature)

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



#### State of Delaware

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### Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RESIDENTIAL PROPERTY GP, 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 FIRST DAY OF FEBRUARY, A.D. 2001.

AND I\_DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

NOT BEEN ASSESSED TO DATE.

OI FER -6 MII: 53
SECRETARY OF STATE
MILAHASSEE, LORINA



Darriet Smith Windson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 0948991

010052845

3342271

DATE: 02-01-01