

m02000000831



ACCOUNT NO. : 072100000032

REFERENCE : 502041 5160089

AUTHORIZATION : Patricia Pizeto

COST LIMIT : \$ 125.00

ORDER DATE : March 28, 2002

ORDER TIME : 9:47 AM

ORDER NO. : 502041-015

000005178830--5

CUSTOMER NO: 5160089

CUSTOMER: Ms. Valerie C. Solar
Amb Property Corp.
Pier 1
Bay1
San Francisco, CA 94111

FOREIGN FILINGS

NAME: PLAZA WEST GP, LLC

*****FILE 1ST*****

XXXX QUALIFICATION (TYPE: LL)

Name	
Availability	
Document	xx
Examiner	DCC
Updater	DCC
Updater	
Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward -- EXT# 1135

EXAMINER: _____

RECEIVED
02 APR - 1 12 PM 1:42
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATION
FILED

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Plaza West GP, LLC
(Name of foreign limited liability company)
2. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 1/16/02 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. January 16, 2002
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. Pier 1, Bay 1
San Francisco, CA 94111
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☐
9. The name and usual business addresses of the managing members or managers are as follows:
- City and County of San Francisco Employees' Retirement System
- c/o AMB Capital Partners, LLC
- Pier 1, Bay 1
- San Francisco, CA 94111
10. 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.)
11. Nature of business or purposes to be conducted or promoted in Florida: to act as the general
partner in a limited partnership

Alison M Hill

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Alison M. Hill VP & Secretary of AMB Capital Partners, LLC the
Typed or printed name of signee
authorized agent for City & County of San Francisco Employees'
Retirement System, the sole member

FILED
02 APR - 1 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

Plaza West GP, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL

32301

(City/State/Zip)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 APR - 1 PM 1:43

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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.



(Signature)

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

Delaware

PAGE 1

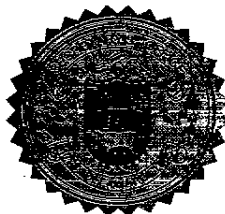
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PLAZA WEST 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 TWENTY-NINTH DAY OF MARCH, A.D. 2002.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PLAZA WEST GP, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JANUARY, A.D. 2002.

FILED
02 APR -1 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3481386 8300

AUTHENTICATION: 1695393

020205862

DATE: 03-29-02