LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
03 SEP -3 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M02000003309

1. Entity Name

RAP SP KENNETH COURT LLC

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
25400 U.S. Highway 19 N.	25400 U.S. Highway 19 N.
Suite, Apt. #, etc. Suite 154	Suite, Apt. #, etc. Suite 154
City & State Clearwater, FL	City & State Clearwater, FL
Zip 33763 Country U.S.A.	Zip 33763 Country U.S.A.

4. FEI Number — Applied For / X Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City Plantation FL Zip Code 33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1st

9. MANAGING MEMBERS / MANAGERS

TITLE MGRM NAME RAP SP MEZZ KENNETH COURT LLC STREET ADDRESS 625 Madison Avenue CITY-ST-ZIP New York, NY 10022		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	000022729380
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

By: RAP SP MEZZ KENNETH COURT LLC
By: RAP SP JV I, LLC
By: Related Apartment Preservation, LLC

SIGNATURE: _____ By: Marla Gafone 9/2/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

212-421-5333

CSC
CORPORATION SERVICE COMPANY™

M 02000003309

ACCOUNT NO. : 072100000032

REFERENCE : ~~226877~~ 4321791

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 55.00

ORDER DATE : September 3, 2003

ORDER TIME : 9:50 AM

ORDER NO. : 226877-010

CUSTOMER NO: 4321791

CUSTOMER: Mr. Aaron Hunt
The Related Companies, Inc.
9th Floor
625 Madison Avenue
New York, NY 10022

FILED
03 SEP -3 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: RAP SP KENNETH COURT LLC

XX ___ ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
XX _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Unassigned - Ext. 1140

EXAMINER'S INITIALS:

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
03 SEP -3 AM 10:42

RECEIVED