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(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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CT CORPORATION

December 18, 2002

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5748068 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

BRE/CW Suites LLC (DE) Registration

Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff_Netherton@cch-lis.com TALLAHASSFF. FI CALL

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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

IN COMPLIANCE WITH LIMITED LIABILITY CON	SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REC PANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	SISTER A F	ORE	IGN
f				
*′———	BRE/CW Suites L.L.C- (Name of foreign limited liability company)		_	
2 207222	3			
(Jurisdiction under the company is organized)	law of which foreign limited liability 3. (FEI number, if applicable)		_	
4. December	9,2002 5. <u>perpetual</u>			
(Date o	9,2002 f Organization) 5. perpetual (Duration: Year limited liability company exist or "perpetual")	will cease to	<u> </u>	
6. <u>business to</u> (Date	be transacted in the future first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)			
7c/o Blacks	tone Real Estate Acquisitions	7		
345 Park A	venue New York, NY 10154	SEC R	02 DI	
	(Street address of principal office)	25	5	•••
8. If limited liability	company is a manager-managed company, check here		18 P	FILED
9. The usual business	s addresses of the managing members or managers are as follows:	FLORID	PM 1: 47	_
BRE/Homesto	ead Village L.L.C.	IDA	7	
c/o Blacksto	one Real Estate Acquisitions		_	
345 Park Ave	enue New York, NY 10154		_ -	
the jurisdiction under the la	certificate of existence, no more than 90 days old, duly authenticated by the official having aw of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign under oath of the translator must be submitted.)			ds in
11. Nature of busine	ss or purposes to be conducted or promoted in Florida:		_	
to own and	operate real estate		·	_
	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 penjury that the facts stated herein are true.)			
	Bill Stein			
	Typed or printed name of signee			
FL057 - 11/1/99 CT System Online	Managing Director and Vice President			

BRE/Homestead Village L.L.C.,

as sole member

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.

BRE/CW Suites L.L.C.		
2. The name and the Florida street	address of the registered agent and office	e are:
C T Corporation Syste.	n	02
· · · · · · · · · · · · · · · · · · ·	(Name)	02 DEC
c/o C T Corporation Sy	stem, 1200 South Pine Island Road	9888 1888 1888
Florida street address (P.O. Box NOT ACCEPTABLE)		PH E
		M I: 47
Plantation	FL 33324	Dr 7
	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.

CT Comporation System
STEPHEN ADAMO
ASSISTANT SECRETARY
(Signature)

1. The name of the Limited Liability Company is:

\$ 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 "BRE/CW SUITES L.L.C." 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 DECEMBER, A.D. 2002.

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



Warriet Smith Hindson Harrier Smith Windson, Secretary of State

AUTHENTICATION: 2154064

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