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ACCOUNT NO. : 07210000032

REFERENCE: 081050 7199649

AUTHORIZATION :

COST LIMIT : \$ 160.00

ORDER DATE: May 5, 2003

ORDER TIME : 1:11 PM

ORDER NO. : 081050-010

CUSTOMER NO: 7199649

CUSTOMER: Ms. Arlene Rasile

Hunton & Williams

Suite 2500, Barclays Financial

Center 1111 Brickell Ave

..Miami, FL 33131

#### FOREIGN FILINGS

NAME: ACP/WESTSHORE PLACE LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_ CERTIFIED COPY

\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull -- EXT# 1115

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:

ACP/Westshore Place LLC			
(Name of foreign	a lim	nited liability company)	
Delaware	3.	Applied For	
Jurisdiction under the law of which foreign limited liability company is organized)	•	(FEI number, if applicable)	
May 2, 2003	5.	Perpetual	-
(Date of Organization)		(Duration: Year limited liability company will cea exist or "perpetual")	ise to
May 7, 2003			
(Date first transacted business in Florida. (Se	ee se	ections 608.501, 608.502, and 817.155, F.S.)	-
444 Brickell Avenue, Suite 900, Miami, Flori	rida	33131	
(Street address	ss o	f principal office)	
If limited liability company is a manager-manage	ed c	ompany, check here	
The name and usual business addresses of the ma	anag	ging members or managers are as follows:	
444 Brickell Avenue, Suite 900, Miami, Flo	orida	a 33131	
			12 (2) 12 (1)
			345,
			32
			<u> </u>
	1	· .	
$\prec$			<u> </u>
Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A plantamental translation of the certificate under oath of the translator must.)  Nature of business or purposes to be conducted.	hoto t be s	copy is not acceptable. If the certificate is in a foreign li submitted.)	
organized for the purpose of transacting all			
- Hun			
	3), F.	horized representative of a member. S., the execution of this document constitutes by that the facts stated herein are true.	

Typed or printed name of signee

### 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:								
ACP/Westshore Place LLC									

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

Stuart K.	. Hoffman, Esq. (Name)
1111 Bri	ickell Avenue, Suite 2500
	Florida street address (P.O. Box NOT ACCEPTABLE)
Miami,	FL 33131
	(Cîty/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.

(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 "ACP/WESTSHORE PLACE 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 SECOND DAY OF MAY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACP/WESTSHORE PLACE LLC" WAS FORMED ON THE SECOND DAY OF MAY, A.D. 2003.

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



Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

3654094 8300

030286179

AUTHENTICATION: 2397276

DATE: 05-02-03