2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Apr 17, 2007 8:00 am Secretary of State **DOCUMENT # M04000002088** 04-17-2007 90256 015 ****50.00 1. Entity Name PPF RTL 7535 DADELAND MALL, LLC Principal Place of Business Mailing Address **60031000** 3424 PEACHTREE ROAD N.E. 3424 PEACHTREE ROAD N.E. SUITE 800 SUITE 800 ATLANTA, GA 30326-1118 ATLANTA, GA 30326-1118 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04052007 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For 20-1152366 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM ☐ Delete TITLE Addition TITLE ☐ Chance PPF RETAIL, LLC NAME NAME 3424 PEACHTREE ROAD N.E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ATLANTA, GA 303261118 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE C(TY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Channe ☐ Addition NAME NAME

FILED

☐ Change

☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

☐ Delete

STREET ADDRESS

CITY-ST-ZIP

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TITLE

NAME STREET ADDRESS

JRE: Lail Freeman Gail Freeman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 404-846-1363 Daytime Phone # Date

ATTACHMENT

60037862 FINULOOOD02088

ATTACHED TO 2007 FL ANNUAL REPORT PPF RTL 7535 DADELAND MALL, LLC

SIGNATURE BLOCK:

PPF RTL 7535 Dadeland Mall, LLC

By: PPF Retail, LLC, its sole member

By: PPF OP, LP, its sole member

By: PPF OPGP, LLC, its General Partner

By: Prime Property Fund, LLC, its sole member

By: Morgan Stanley Real Estate Advisor, Inc., its Manager

By: Loil Freeman, Assistant Secretary