

M04000004767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

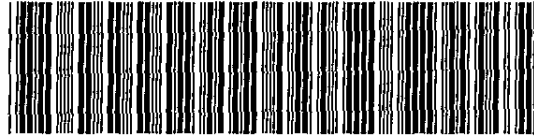
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
04 NOV -3 AM 10:56
STATE REGISTRATIONS
DIVISION OF STATE FLORIDA
TALLAHASSEE

FILED
04 NOV -3 PM 2:00
STATE REGISTRATIONS
DIVISION OF STATE FLORIDA
TALLAHASSEE



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 953154 7157078
AUTHORIZATION :
COST LIMIT : \$ 160.00

FILED
04 NOV -3 PM
TALLAHASSEE FLORIDA
Patricia [Signature]

ORDER DATE : November 2, 2004
ORDER TIME : 9:59 AM
ORDER NO. : 953154-005
CUSTOMER NO: 7157078
CUSTOMER: Ms. Jennifer R. Mulvaney
Centrum Properties Inc.
4th Floor
225 West Hubbard Street
Chicago, IL 60610-4416

FOREIGN FILINGS

NAME: MCZ/CENTRUM FLORIDA V OWNER,
L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY
XX _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Justin Cheshire -- EXT# 2909

EXAMINER: _____

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

FILED
04 NOV 2004
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
PM 2:00

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. MCZ/Centrum Florida IV Owner, L.L.C.
(Name of Foreign Limited Liability Company)

2. Illinois 3. 20-1740539
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. October 7, 2004 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. Upon filing.
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 225 West Hubbard, 4th Floor
Chicago, IL 60610
(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:
See Attachment 1.

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: Real Estate Development

Jennifer R. Mulvaney
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.)
Jennifer R. Mulvaney, Organizer
Jennifer R. Mulvaney
Typed or printed name of signee

FILED
04 NOV 2004
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
PM 2:00

Attachment 1
To
Application by Foreign Limited Liability Company for
Authorization to Transact Business in Florida for
MCZ/Centrum Florida V Owner, L.L.C., an Illinois limited liability company

FILED
04 NOV -3 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Managers:

Laurence Ashkin, 225 West Hubbard Street, 4th Floor, Chicago, IL 60610
Arthur Slaven, 225 West Hubbard Street, 4th Floor, Chicago, IL 60610
Michael Lerner, 1555 North Sheffield Avenue, Chicago, IL 60622
Brian Niven, 1555 North Sheffield Avenue, Chicago, IL 60622

**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:

MCZ/Centrum Florida V Owner, L.L.C.

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

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, Florida Statutes.

Corporation Service Company

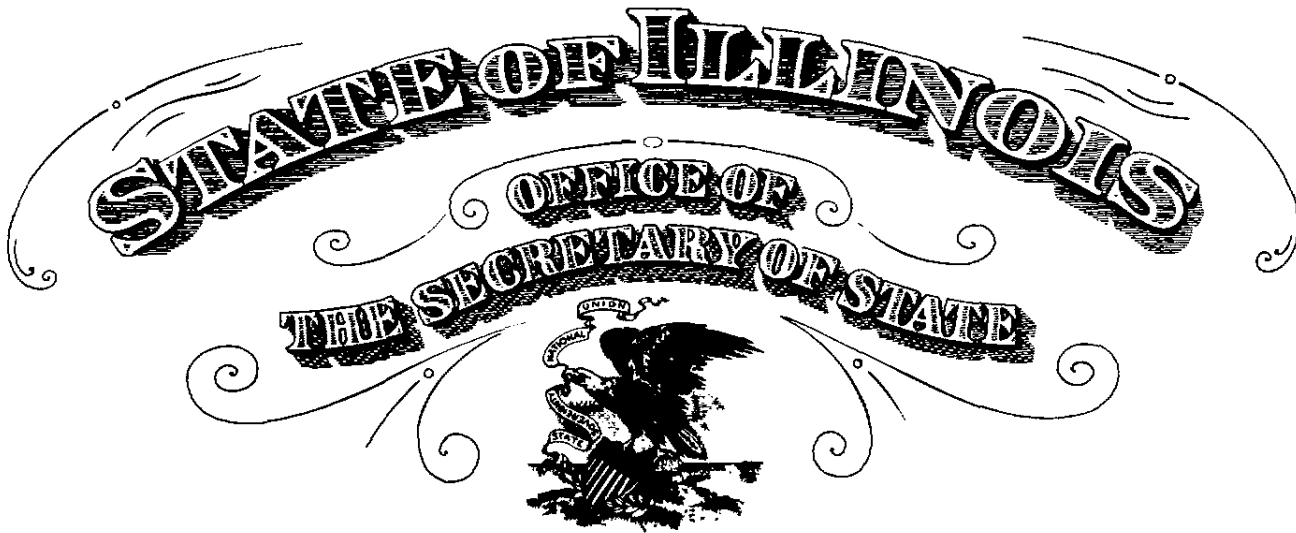
By: 

(Signature)

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

File Number

0131240-5

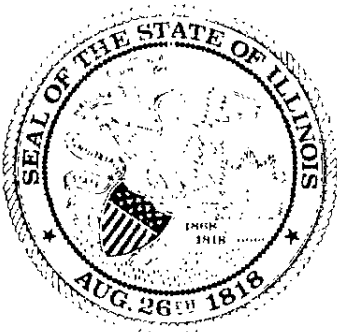


To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

MCZ/CENTRUM FLORIDA V OWNER, LLC,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON OCTOBER 07, 2004,
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING
OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT
BUSINESS IN THE STATE OF ILLINOIS.

*In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this* 14TH
day of OCTOBER A.D. 2004



Jesse White

SECRETARY OF STATE