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SKOTPETET OS AUNTOS

GENERAL OS AUNTOS

J. BRYAN DEC 1 2004



ACCOUNT NO. : 072100000032

REFERENCE : 031909

7157078

AUTHORIZATION :

COST LIMIT : \$ 160.00

ORDER DATE: November 30, 2004

ORDER TIME : 3:19 PM

ORDER NO. : 031909-005

CUSTOMER NO: 7157078

CUSTOMER: Ms. Jennifer R. Mulvaney

Centrum Properties Inc.

4th Floor

225 West Hubbard Street Chicago, IL 60610-4416

FOREIGN FILINGS

MCZ/CENTRUM FLORIDA V OWNER, NAME:

L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

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:

	(Name of Foreign Limite	d Liz	ability Company)			
Illinois		3	20-1740539			
furisdiction under the law of whicompany is organized)	ich foreign limited liabilit	у —.	(FEI nu	nber, if applica	ble)	
October 7, 2004		5.	perpetual			
(Date of Organizat	tion)		(Duration: Year limit exist or "perpetual")	ed liability com	pany will c	ease to
Upon filing.		Y	18:1			
(Date in (See secti	irst transacted business in ions 608.501 & 608.502 F	Flori	ida, if prior to registration of determine penalty liab	n.) ility)	<u>-</u>	
225 West Hubbard, 4th	Floor				- 5	28
Chicago, IL 60610					A.	NOV 30
	(Street Addre	ss of	Principal Office)		S	3
If limited liability company	is a manager-manag	ed c	ompany, check here	V	SHS.	7
					. P	7 JO
The name and usual busines	ss addresses of the ma	anag	ging members or ma	nagers are as	follows	9:08
See Attachment 1.					DA.	ξ α
See Attachment 1.					DA	2 6
See Attachment 1.					A	
See Attachment 1.					D A	
See Attachment 1.					DA	
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Attached is an original certificate o	ait is organized. (A photoc	оруі	s not acceptable. If the ce			dy of rec
Attached is an original certificate of jurisdiction under the law of which	ait is organized. (A photoc	оруі	s not acceptable. If the ce			dy of rec
Attached is an original certificate or jurisdiction under the law of which islation of the certificate under oath	ait is organized. (A photoco n of the translator must be su	opy i Ibmii	s not acceptable. If the cetted.)	nificate is in a fi	breign langr	dy of rec
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Attached is an original certificate or jurisdiction under the law of which islation of the certificate under oath. Nature of business or purp Signatur (in accorde sh affirmation)	a it is organized. (A photoco of the translator must be sto be conducted to be conducted are of a member or an	opyi bmi or p Atth auth F.S.	snot acceptable. If the cetted.) promoted in Florida: orized representative, the execution of this door, that the facts stated hereing	rificate is in a fi	orden lang. de Devel	dy of rec

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

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

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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	Z/Centrum Florida V Owner, L.L.C.	
2. ′	The name and the Florida street address of the registered agent and office are:	THE PORT T
	Corporation Service Company	至 38 仁
	(Name)	SSE S
	1201 Hays Street	E, FL
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	08
	Tallahassee FL 32301	P 5
	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.

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

day of

NOVEMBER

A.D

2004

Desse White

SECRETARY OF STATE