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TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: 4011 OKEECHOBEE BOULEVARD GP, LLC

(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Lynn (C. Washington	
	(Name of Person)	•
Holland & Knight LLP		
	(Firm/Company)	<u> </u>
701 Brickell Avenue, Suite	∋ 3000	
	(Address)	
Miami, Florida 331	31	
	(City/State and Zip Code)	

For further information concerning this matter, please call:

Lynn C. Washington at (305) 789-7424

(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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:

	d Liability Company)
DELAWARE	3. 582516335
(Jurisdiction under the law of which foreign limited liability company is organized)	
JULY 15, 2003	5.
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
DATE OF REGISTRATION	
(Date first transacted business in (See sections 608.501 & 608.502 F	Florida, if prior to registration.)
·	
30 BROAD STREET, 31ST FLOOR, NEW YORK, N	1 10004
(Street Addre	ess of Principal Office)
If limited liability company is a manager-manage	ed company check here
If fiffined flatinty company is a manager-manage	cu company, check here
The name and usual business addresses of the ma	anaging members or managers are as follows:
URBANAMERICA, L.P.	
30 BROAD STREET 31ST FLOOR, NEW YORK, N	Y 10004
30 BROAD STREET 31ST FLOOR, NEW YORK, N	Y 10004
30 BROAD STREET 31ST FLOOR, NEW YORK, N	Y 10004
). Attached is an original certificate of existence, no more than 9	90 days old, duly authenticated by the official having custody of rec
). Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photoc	90 days old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a
). Attached is an original certificate of existence, no more than 9	90 days old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a
). Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photocomslation of the certificate under oath of the translator must be so	90 days old, duly authenticated by the official having custody of rec copy is not acceptable. If the certificate is in a foreign language, a ubmitted.)
). Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photoc	90 days old, duly authenticated by the official having custody of rec copy is not acceptable. If the certificate is in a foreign language, a ubmitted.)
). Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photocomslation of the certificate under oath of the translator must be so	90 days old, duly authenticated by the official having custody of rec copy is not acceptable. If the certificate is in a foreign language, a ubmitted.)
). Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photocomslation of the certificate under oath of the translator must be so	90 days old, duly authenticated by the official having custody of rec copy is not acceptable. If the certificate is in a foreign language, a ubmitted.)
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D. Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be sure.) I. Nature of business or purposes to be conducted. Signature of a member or an	90 days old, duly authenticated by the official having custody of rec copy is not acceptable. If the certificate is in a foreign language, a ubmitted.)
Attached is an original certificate of existence, no more than 9 e jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be start. Nature of business or purposes to be conducted Signature of a member or an (In accordance with section 608.408(3))	90 days old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a ubmitted.) I or promoted in Florida: REAL ESTATE ACTIVITY authorized representative of a member.

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:						
 4011 OKEECHOBEE BOULEVARD GP, LLC						
2. The name and the Florida street address of the registered agent and office are:						
Lynn C. Washington						
(Name)						
701 Brickell Avenue, Suite 3000						
Florida Street Address (P.O. Box NOT ACCEPTABLE)						
Miami FL 33131						
(Name) 701 Brickell Avenue, Suite 3000 Florida Street Address (P.O. Box NOT ACCEPTABLE)						

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.

(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 "4011 OKEECHOBEE BOULEVARD GP, 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 THIRD DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "4011 OKEECHOBEE BOULEVARD GP, LLC" WAS FORMED ON THE NINETEENTH DAY OF JANUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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Variet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3853913

050358753 DATE: 05-03-05