# MO6U000 00235

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PICK-UP WAIT MAIL
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2006 JAN 13 AM 9: 42 SECRETARY OF STATE TALL AHASSEE, FLORID

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OF JULY 13 PM 4:43

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SECRETARY OF STATE
TALLARISEE, FLORID:

EIFED



ACCOUNT NO.	: 072100000032					
REFERENCE	: 810442 4321791					
AUTHORIZATION	: Spullelenant &					
COST LIMIT	: \$ 125.00					
	Fig. 3					
ORDER DATE: January 13, 2006	- 765 4					
ORDER TIME : 2:37 PM						
ORDER NO. : 810442-015	·					
CUSTOMER NO: 4321791						
FOREIGN FILINGS						
NAME: CUTLER VISTA II, LLC	PRESERVATION GP					
XXXX QUALIFICATION (TYPE: L	<u>L</u> )					
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:					
XX PLAIN STAMPED COPY						
CONTACT PERSON: Pollye Janisse EXT# 2954						
EXAMINER:						
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#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

TAT COMPUTAN	י גוודיונגון ישיינג	TECTION FOR SOR	דוגייט גרוואר איז	יאדו	THE FOLLOWING IS	מר כו <del>הרוירו</del> אומוזי	े सन्दर्भाष्ट्रस्था	E FORFIC
IN COMPLIAIN LIMITED LIAB	ILITY COMP	ANY TO TRANSAC	TBUSINESS IN TI	TE S	TATE OF FLORIDA:	OCCUPANTALIZED 10		A FOREIG
1 Cutler Vist	ta Preservati	on GP II, LLC					E.C.	3 0
1+		(Name o	of Foreign Limite	d Lia	bility Company)			7 2
2. Delaware				3.	Applied For		1	70x
(Jurisdiction company is		w of which foreig	gn limited liability	y	(FEI num	ber, if applica	ole)	CORE.
4. January 13	3, 2006			5.	December 31, 2056			T
<del>,</del>	(Date of	Organization)			(Duration: Year limite exist or "perpetual")	d liability comp	any will ceas	e to
6								
		(Date first trans (See sections 608	acted business in .501 & 608.502 F	Flori .S. to	da, if prior to registration determine penalty liabil	ı.) lity)	,	
7. c/o The Re	elated Comp	anies, L.P. 60 Co	Iumbus Circle Ne	w Yo	ork NY 10023			
	<del></del>	-			<del></del>	-,-		
			(Street Addre	ss of	Principal Office)			<del></del>
						<del></del> 1		
8. If limited	l liability o	ompany is a m	anager-manage	ea co	ompany, check here			
9. The name	e and usua	l business addr	esses of the ma	anag	ing members or man	agers are as	follows:	
Vulean U	laidinan II.	C 60 Columbus C	Sirata Naw Vorle	_ \rv 1	nn23			
- I UKUM 11	oldings, LL	C oo columbus C	incie, ivew i olk i		0025		<del></del> -	<del></del>
Beachbo	x Holdings l	I, LLC 60 Colum	bus Circle New	York	NY 10023	_		
<del></del>		<u></u>				= -	•	40
						<u> </u>		<del></del>
					vs old, duly authenticated b s not acceptable. If the cen			
		under oath of the tr						•
**	<b>C1</b>		7			real estate hol	dings	
11. Nature	of busines	s or purposes to	be conducted	or p	romoted in Florida:			
								•
	-	ho	H Osh	٠	•		- \	·
					orized representative			
		(In accordance with an affirmation und	r section 608.408(3), er the penalties of pe	, F.S., ::::ury	the execution of this docum that the facts stated herein a	ent constitutes re true.}	\.	
					zed Representati		)	

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:					
Cutler Vista Preservation GI	P II, LLC				
2. The name and the Flor	rida street address of the registered agent and office a	re:			
CORPORATION SERVICE COMPANY					
-	(Name)				
1201 HAY	YS STREET				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
TALLAHA	SSEE FL 32301 City/State/Zip				
	City/State/Lip				

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.

Laura R. Dunlap

\$ 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 "CUTLER VISTA PRESERVATION GP II, 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 THIRTEENTH DAY OF JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CUTLER VISTA PRESERVATION GP II, LLC" WAS FORMED ON THE THIRTEENTH DAY OF JANUARY, A.D. 2006.

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

Warriet Smith Windson
Harrier Smith Windson, Secretary of State

Harrier Smith Windsor, Secretary of State
AUTHENTICATION: 4447218

DATE: 01-13-06