

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : NRAI SERVICES, LLC  
Account Number : I20080000104  
Phone : (302) 674-4089  
Fax Number : (302) 674-5266

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: tburnside@paragonoutlets.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
PRIME RETAIL PROPERTY MANAGEMENT LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

**S. HAWKES**

OCT 19 2010

**EXAMINER**

RECEIVED  
10 OCT 18 PM 12:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H10000227663 3

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-3 must be completed)**

1. Name of limited liability company as it appears on the records of the Florida Department of State: Prime Retail Property Management, LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: November 8, 2008

**SECTION II (4-7 complete only the applicable changes)**

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? \_\_\_\_\_
5. New name of the limited liability company: Paragon Retail Property Management, LLC.  
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration: \_\_\_\_\_
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: \_\_\_\_\_
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: \_\_\_\_\_
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Thomas B. Borusicle  
Signature of a member or the authorized representative of a member

Thomas B. Borusicle, Authorized  
Typed or printed name of signee Person

**Filing Fee: \$25.00**

H10000227663 3

H10000227663 3

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PRIME RETAIL PROPERTY MANAGEMENT, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "PARAGON RETAIL PROPERTY MANAGEMENT LLC.", THE FIFTEENTH DAY OF OCTOBER, A.D. 2010, AT 12:15 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

FILED  
10 OCT 18 AM 8:49  
TREASURER'S OFFICE  
DELAWARE

4083765 8320

101003203

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8294397

DATE: 10-18-10

H10000227663 3