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ACCOUNT NO. : 072100000032

REFERENCE : 751443

4304394

AUTHORIZATION .

COST LIMIT

ORDER DATE: February 8, 2007

ORDER TIME : 3:37 PM

ORDER NO. : 751443-005

CUSTOMER NO: 4304394

#### FOREIGN FILINGS

NAME: 350-450 LAS OLAS HOLDINGS,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER:

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTE TED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE .		MITTED TO REGISTER A FOREIGN
E.ALPEI			75 S A
1	350-450 LAS OLAS HOLDINGS (Name of Foreign Limited Li		
	(Name of Poleign Limited Ci	souny Company)	上海 中
2	Delaware 3.	·	<u> </u>
CO	arisdiction under the law of which foreign limited liability mpany is organized)	(FEI number	if applicable)
4, _	February 7, 2007 5.	perpetual	
	(Date of Organization)	(Duration: Year limited lie exist or "perpetual")	ability company will crass to
6.	upon filing		<u>o</u> m
	(Date first transacted business in Flor (Sec sections 608.501 & 608.502 F.S. (	rida, if prior to registration.) to determine penalty liability)	
7	c/o ING Clarion Partners, LLC		
	230 Park Avenue - New York, 1	New York 10169	
	(Street Address o	f Principal Office)	
	f limited liability company is a manager-managed of the name and usual business addresses of the manager	, , , ,	
-	ING Clarion Partners, LLC		
_	230 Park Avenue		
_	New York, New York 10169		
the ju	Attached is an original certificate of existence, no more than 90 da visibilition under the law of which it is organized. (A photocopy ation of the certificate under oath of the translator must be submi	is not acceptable. If the certifica	e official having custody of records in the is in a foreign language, a
11.	Nature of business or purposes to be conducted or p		
	and development and any and all lawful be related thereto	businesses and act:	ivities that may
	Gred M	SA	*
	Signature of a member or an auti	orized representative of	a member.
	(In accordance with section 608.408(3), F.5 an affemation under the penalties of perjur	., the execution of this document y that the facts stated herein are t	constitutes nie.)
	EDWALD M	12 Then	
	Typed or printed r	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:

350-450 LAS OLAS	HOLDINGS, LLC			
and the Florida street addr	ress of the registered agent and of	fice are:		
Corporation Service Company				
(Name)				
1201 Hays Street				
Florida Street	Address (P.O. Box NOT ACCEPTABLE)			
Tallahassee	FL 32301			
	City/State/Zip			
	and the Florida street addr  Corporation Service Comp  1201 Hays Street  Florida Street  Tailahassee  mamed as registered agent of	(Name)  1201 Hays Street  Florida Street Address (P.O. Box NOT ACCEPTABLE)  Tailzhassee FL 32301		

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

# Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "350-450 LAS OLAS HOLDINGS, 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 SEVENTH DAY OF FEBRUARY, A.D. 2007.

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

4294992 8300

070138521

Darriet Smile Hinden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5416302

DATE: 02-07-07