M 67000001097

(Re	equestor's Name)	<u> </u>
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing officer:	

Office Use Only



500087068845

02/26/07--01001--021 **3375.00

07 FEB 23 AM 8: 56
SECRETARY OF STATE
ALL AHASSET FROBIN

COVER LETTER

Registration Section TO:

Division of Corporations

SUBJECT: Fund VIII Southpointe, LLC

(Name of Limited Liability Company)

OTERO SAMO, SO 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:

Heather Kennedy

(Name of Person)

Stutzman, Bromberg, Esserman & Plifka, PC

(Firm/Company)

2323 Bryan Street, Suite 2200

(Address)

Dallas, Texas 75201

(City/State and Zip Code)

For further information concerning this matter, please call:

Heather Kennedy

(Name of Person)

MAILING ADDRESS:

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clivates of Corporation

Enclosed is a check for the following amount:

Certificate of The Control

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

l.	Fund VIII Southpointe, LLC						
	Fund VIII Southpointe, LLC (Name of Foreign Limited Liability Company) Delaware (Jurisdiction under the law of which foreign limited liability company is organized) January 3, 2007 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")						
4.	January 3, 2007 (Date of Organization) [Date of Organization] [Duration: Year limited liability company will cease to exist or "perpetual")						
6.	N/A (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)						
7.	28 State Street, 10th Floor						
	Boston, MA 02109 (Street Address of Principal Office)						
8.	. If limited liability company is a manager-managed company, check here						
9.	The name and usual business addresses of the managing members or managers are as follows: The Realty Associates Fund VIII, L.P.						
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.)						
11	. Nature of business or purposes to be conducted or promoted in Florida: To acquire, own,						
	refinance, sell, transfer, construct improvements and otherwise operate real property.						
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) See attached signature rider						

Typed or printed name of signee

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

MEMBER:

The Realty Associates Fund VIII, L.P., a Delaware limited partnership,

By: Realty Associates Fund VIII, LLC

By: Realty Associates Advisors LLC

By: Realty Associates Advisors Trust

Name: Scott L. Dalrymple
Title: Sr. Vice President

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 i	is:
----	----------	--------	---------	-----------	-----------	-----

Fund VIII Southpointe, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company					
	(Name)				
1201 Hays Street					
Florida Street Add	dress (P.O. Box NOT ACCEPTABLE)				
Tallahassee	_{FL} 32301				
	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.

nature)

\$ 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

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FUND VIII SOUTHPOINTE, 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 TWENTY-SECOND DAY OF FEBRUARY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FUND VIII SOUTHPOINTE, LLC" WAS FORMED ON THE THIRD DAY OF JANUARY, A.D. 2007.

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

LANCE CONTROL OF THE PARTY OF T

4278972 8300 070205659 Warriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5452093

DATE: 02-22-07