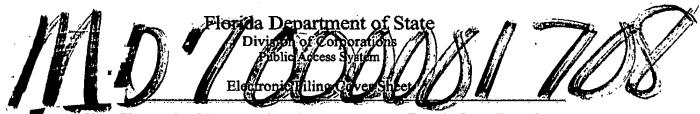
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Division of Corporations

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Account Name

: LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036

(407)843-4600

Phone Pax Number

: (407)843-4444

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

HCP SLB Florida, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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H070000756073

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

IN COMPLIANCE WITH SECTION 608508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	•	3. 20-0041062	
Helaware  urisdiction under the law of  mapany is organized)	f which foreign limited liabil	(FEI number, if applicable)	
05/20/2003		5 Perpetual	
(Date of Orga	inization)	(Duration: Year limited liability company will ce exist or "perpetual")	ase to
Upon filing	·	e y let let be be the transfer	· t
(D) (See	ate first transacted business is sections 608.501 & 608.502	in Florida, if prior to registration.) 2 F.S. to determine penalty liability)	
3760 Kilroy Airpor	rt Way, Suite 300		· •
Long Beach, Califo	omia 90806		
	(Street Add	dress of Principal Office)	Zo
If limited liability comp	pany is a manager-mana	aged company, check here	ECRE
The name and usual bu	isiness addresses of the	managing members or managers are as follows:	TAS
HCP Partners, LP.	3760 Klirov Airport V	Way, Suite 300, Long Beach, California 908	308
110, (0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0			77
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			95
	Photo: 1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4		
e jurisdiction under the law of instation of the certificate under	which it is organized. (A photer cash of the translator must be	an 90 days old, duly authenticated by the official having custo tocopy is not acceptable. If the certificate is in a foreign langue e submitted.) ted or promoted in Florida:	dy of reco
e jurisdiction under the law of instation of the certificate under 1. Nature of business or	which it is organized. (A photer cash of the translator must be	tocopy is not acceptable. If the certificate is in a foreign large e submitted.)  deed or promoted in Florida:	dy of reco
e jurisdiction under the law of instation of the certificate under 1. Nature of business or	which it is organized. (A photer cash of the translator must be purposes to be conducted.)	tocopy is not acceptable. If the certificate is in a foreign large e submitted.)  deed or promoted in Florida:	dy of reco
e jurisdiction under the law of unstation of the certificate under the law of unstation of the certificate under the law of the law	which it is organized. (A photer cath of the translator must be purposes to be conducted or mercial real properties of a member or a accordance with section 608.408 offirmation under the penalties of the penalt	tocopy is not acceptable. If the certificate is in a foreign large e submitted.)  deed or promoted in Florida:	dy of reco

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## 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.

FLORIDA.							
1. The name o	f the Limited Liability Comp	any is:					
HCP SLB	Florida, LLC				K.		• • • •
2. The name a	nd the Florida street address	of the registe	red agent and o	office are:			
,			*****	na finite i di sa Li kifa di sakati di kida			
A STATE OF THE STATE OF	Corporation Service	Company	<u> </u>				
· 2 1		(IAEUD)					
•••••	1201 Hays Street		<u> </u>		 	•	
	Florida Street Add	ireas (P.O. Box	NOT ACCEPTABLE	LE)	SEC	07	
•	Tallahassee	FL	32301		AH.A 138C1	MAR 22	GOLDEN OF THE PARTY OF THE PART
		City/State/	Zip		AR	22	, marr
ltability compa	amed as registered agent and t ny at the place designated in t re to act in this capacity. I furt	his certificate	, I hereby accep	ot the appointme	nt as registered	<b>√8</b> €3:	
relating to the obligations of t	proper and complete performs by position as registered again tion Service symmetry	ince of my dia	ties, and I am fo	uniliar with and	accept the	31	

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

Greggory A. Pappas, Assistant Secretary

# Delaware

H070000756073

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "RCP SLB FLORIDA, 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 THENTIETH DAY OF MARCH, A.D., 2007.

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

AND I DO REREBY FURTHER CERTIFY THAT THE SAID "HCP SLB FLORIDA, LLC" WAS FORMED ON THE TWENTIETH DAY OF MAY, A.D. 2003.

to Fritz att in Kir

070337919



AUTRENTICATION: 5521781

DATE: 03-20-07