# M07000003548

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #) .
PICK-UI	P WAIT MAIL
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TO ACANOWLEDGE TO ACANOWLEDGE TO ACANOWLEDGE DEPARTMENT OF STATE



ION SERVICE COMPANY.					
ACCOUNT NO. : 072100000032					
REFERENCE : 945062 4361510					
AUTHORIZATION: Spillele na Piccilia					
COST LIMIT : \$ 125.00					
ORDER DATE: June 12, 2007					
ORDER TIME : 12:53 PM					
ORDER NO. : 945062-005					
CUSTOMER NO: 4361510					
FOREIGN FILINGS					
REFERENCE : 945062 4361510  AUTHORIZATION : S 125.00  ORDER DATE : June 12, 2007  ORDER TIME : 12:53 PM  ORDER NO. : 945062-005  CUSTOMER NO: 4361510  FOREIGN FILINGS  NAME: CRP-2 COLONNADES, LLC  XXXX QUALIFICATION (TYPE: LL)  PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  ———————————————————————————————————					
XXXX QUALIFICATION (TYPE: <u>LL</u> )					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
XX PLAIN STAMPED COPY					
CONTACT PERSON: Carina L. Dunlap EXT# 2951					

EXAMINER:

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

	APPLICATION BY FOREIGN LIMITED LIABILITY TRANSACT BUSINESS	TTY COMPANY FOR AUTHORIZATION TO SS IN FLORIDA				
	N COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, TI IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STAT					
1	CRP-2 Colonnades, LLC					
••	(Name of Foreign Limited Liabili	ity Company)				
2.	Delaware 3, 2	.6-0326303 × × × × × × × × × × × × × × × × × ×				
( (	(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)				
4.		erpetual 60				
•	(Date of Organization) (2	Duration: Year limited liability company will cease to xist or "perpetual")				
6.						
	(Date first transacted business in Florida, (See sections 608.501 & 608.502 F.S. to de	if prior to registration.) stermine penalty liability)				
7.	Two International Place, Suite 2500					
	Boston, MA 02110					
	(Street Address of Pri	ncipal Office)				
8.	If limited liability company is a manager-managed com	pany, check here				
9.	The name and usual business addresses of the managing	g members or managers are as follows:				
	Colony Realty Partners II REIT					
	1999 Avenue of the Stars, Suite 1200					
	Los Angeles, CA 90067					
he.	). Attached is an original certificate of existence, no more than 90 days of e jurisdiction under the law of which it is organized. (A photocopy is no inslation of the certificate under oath of the translator must be submitted.)	nt acceptable. If the certificate is in a foreign language, a				
l 1.	Nature of business or purposes to be conducted or pror	moted in Florida: To acquire and own				
	real property and improvements	•				
	Jay Mullery					
	Signature of a member or an authorize (In act ordance with section 608.408(3), F.S., the an affirmation under the penalties of perjury that	execution of this document constitutes				
	Joy Mallory Typed or brinted nam					
	Tuned or brinted nam	a of signag				

## 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.

	of the Limited Liability Company is:	
CRP-2 Color	onnades, LLC	<del></del> .
2. The name ar	and the Florida street address of the registered agent and office are:	
	Corporation Service Company	
	(Name)	
	1201 Hays Street	
	Florida Street Address (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.

Corporation Service Company

By: 
Signature

Signature

\$ 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 "CRP-2 COLONNADES, 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 TWELFTH DAY OF JUNE, A.D. 2007.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CRP-2 COLONNADES, LLC" WAS FORMED ON THE EIGHTH DAY OF JUNE, A.D. 2007.

4367481 8300

070698429

Warriet Smith Windson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 5749564

DATE: 06-12-07