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DIVISION LOGGEFFERMION



REFERENCE : 023743 4312639

AUTHORIZATION :

COST LIMIT : \$ 160.00

ORDER DATE : July 24, 2007

ORDER TIME : 3:58 PM

ORDER NO. : 023743-060

CUSTOMER NO: 4312639

FOREIGN FILINGS

ACCOUNT NO. : 072100000032

NAME: CENTRO NP REGENCY PARK SC, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds -- EXT# 2933

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 C	entro NP Regency Park SC, LLC
*	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
conse	ne unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written at of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability any," "L.L.C.," "LLC.")
2. De	elaware 3. 26.0475320 (FEI number, if applicable)
(Jur	isdiction under the law of which foreign limited liability (FEI number, if applicable)
4. Ju	ine 29, 2007 5 Perpetual
**	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
б.	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. <u>4</u> 2	20 Lexington Ave., 7th Floor, New York, NY 10170
_	(Street Address of Principal Office)
o it	limited lightlity company is a manager way of the lightline of the lightli
0, 11	limited liability company is a manager-managed company, check here
9. Th	e name and usual business addresses of the managing members or managers are as follows:
N	ew Plan Florida Holdings, LLC, 420 Lexington Ave., 7th Floor,
N	ew York, NY 10170
hejuni	ached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in sdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ion of the certificate under eath of the translator must be submitted.)
11. N	ature of business or purposes to be conducted or promoted in Florida:
Ov	vnership, operation and mapagement of shopping centers and related activities.
	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.) Steven Siegel
	Typed or printed 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 1	Limited Liability Comp	oany is:		
Centro NP Regen	cy Park SC, LLC	***		
If name unavailable,	the alternate name to b	be used in the state of Florida is:		
2. The name and the	: Florida street address	of the registered agent and office are:		
Cor	Corporation Service Company			
	(Name)			
120	1 Hays Street			
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Tal	lahassee	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 Con pany

(Signature)
Ann R. Shilling, Asst. V.P.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CENTRO NP REGENCY PARK SC, 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-FOURTH DAY OF JULY, 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 "CENTRO NP REGENCY PARK SC, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JUNE, A.D. 2007.



irret Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5867496

DATE: 07-24-07

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