# M08000000648

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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08 FEB -7 PH 3: 28 SECRETARY OF STATE SECRETARY OF STATE

B. KOHR

FEB 7 2008

**EXAMINER** 



ON SERVICE COMPANY
ACCOUNT NO. : 072100000032
REFERENCE : 434930 4302355
AUTHORIZATION :
COST LIMIT : \$ \$55.00
ORDER DATE : February 6, 2008
ORDER TIME : 9:07 AM
ORDER NO. : 434930-035
CUSTOMER NO: 4302355
FOREIGN FILINGS
NAME: G&I VI HERON LAKE 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: Troy Todd EXT# 2940

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 LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

G&I VI HERON LAKE LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Delaware 3. Applied for
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4, 02/04/2008 5, perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification
(See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. c/o DRA Advisors LLC  220 East 42nd Street, 27th Floor, New York NY 10017  (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:
7. c/o DRA Advisors LLC
220 East 42nd Street, 27th Floor, New York NY 10017  (Street Address of Principal Office)
(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:
G&I VI Mezz Wrangler LLC
c/o DRA Advisors LLC
220 East 42nd Street, 27th Floor, New York NY 10017
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Real estate
··································
FH C
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.)
Authorized person of G&I VI Mezz Wrangler LLC. its Sole Member
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 Limited Liability Company is:

2. The name	e and the Florida street address of t	he registered agent and office	are:
	Corporation Service Com	oanv	
	Corporation Box vice Com	(Name)	<del></del>
	1201 Hays Street		
	Florida Street Address	(P.O. Box NOT ACCEPTABLE)	
	Tallahassee	<sub>FL</sub> 32301	··
		City/State/Zip	
liability compagent and ag	named as registered agent and to a pany at the place designated in this o gree to act in this capacity. I further ne proper and complete performance	certificate, I hereby accept the a agree to comply with the provi	appointment as register sions of all statutes

\$ 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 "G&I VI HERON LAKE 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. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "G&I VI HERON LAKE LLC" WAS FORMED ON THE FOURTH DAY OF FEBRUARY, A.D. 2008.

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

4499328 8300

080128919

Varuet Smith Windsor, Secretary of State

AUTHENTICATION: 6366634

DATE: 02-07-08

You may verify this certificate online at corp.delaware.gov/authver.shtml