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EXAMINER





N SERVICE COMPANY.
ACCOUNT NO. : 072100000032 REFERENCE : 650536 5048229 AUTHORIZATION : Trubble no. 5000000000000000000000000000000000000
REFERENCE : 650536 5048229
AUTHORIZATION: Spullelena 5 = 5
COST LIMIT : \$ 125.00
ORDER DATE: July 16, 2008
ORDER TIME : 3:26 PM
ORDER NO. : 650536-030
CUSTOMER NO: 5048229
FOREIGN FILINGS NAME: PPN PANAMA CITY, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight EXT# 2956
EXAMINER:

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

ACTION AND LIGHTER THE THE PROPERTY OF THE PRO

IN COMPLIANCE WITH SECTION BIBSUS, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO I LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	REGISTER A FUREIGN
, PPN Panama City, LLC	•
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of	or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attac consent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C.," "LLC.")	ch a copy of the written "Limited Liability
2 Delaware 3, 26-2985232	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable company is organized))
4. July 16, 2008 5. Perpetual	
(Date of Organization) (Duration: Year limited liability companexist or "perpetual")	y will cease to
6. July 1 6 , 2008	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 180 East Broad Street, 21st Floor	<u> </u>
Columbus, Ohio 43215	THE T
(Street Address of Principal Office)	一方に
8. If limited liability company is a manager-managed company, check here	08 JUL 17 AM 8: 35
9. The name and usual business addresses of the managing members or managers are as fo	llows:
Glimcher Panama City, LLC	Jan 3
180 East Broad Street, 21st Floor	
Columbus, Ohio 43215	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fore translation of the certificate under eath of the translator must be submitted.)	ign kugunge, a
11. Nature of business or purposes to be conducted or promoted in Florida: _ Own, developerate and manage a commercial center with retail, restaurant, office and other commercial center with retail of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida: _ Own, development of the conducted or promoted in Florida in the conducted or promoted in th	elop, lease, mercial service
operations and all other acts or things which may be incidental or necessary to carry of	on the business
of the company.	
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.) Kim A. Rieck	
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.

DDM Damana			
PPN Panama	City, LLC		
If name unavai	table, the alternate name to	be used in the state of Florida is:	
2. The name as	nd the Florida street address	s of the registered agent and office are:	
	Corporation Service C	Company	
		(Name)	_
,	1201 Hays Street		
	Florida Street Ac	ddress (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: Kelley Cokelin Aut Secretary

\$ 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 "PPN PANAMA CITY, 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 SEVENTEENTH DAY OF JULY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PPN PANAMA CITY, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JULY, A.D. 2008.

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

4575917 8300

080791475

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

Darriel Smith Hindren

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6733444

DATE: 07-17-08