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EXAMINER



ACCOUNT NO. : 072100000032

REFERENCE : 762760 5161288

AUTHORIZATION :

COST LIMIT :

ORDER DATE: October 20, 2008

ORDER TIME : 1:06 PM

ORDER NO. : 762760-005

CUSTOMER NO: 5161288

FOREIGN FILINGS

NAME: CP/IPERS PLANTATION, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY

___ PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis -- EXT# 2926

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:

	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1	CP/IPERS Plantation, LLC
1.	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
cor	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written insent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability impany," "L.L.C.," "LLC.")
2.	Delaware 3, 42-6250870
1	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	February 23, 2006 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	September 1, 2006
٠.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) ING Clarion 12th Floor 230 Park Avenue New York, NY 10169 (Street Address of Principal Office) If limited liability company is a manager-managed company, check here
7.	ING Clarion 12th Floor 230 Park Avenue
	New York, NY 10169
	(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:
	James Facompre 230 Park Avenue 12th Floor New York, NY 10169
	- Total Control of the Control of th
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a islation 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
	1
	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 penury that the facts stated herein are true.) James Facompre
	Typed or printed name of signee
	1 yped of princip hattie 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 I	Limited Liability Company is:
CP/IPERS Plantat	tion, LLC
If name unavailable,	the alternate name to be used in the state of Florida is:
2. The name and the	Florida street address of the registered agent and office are:
Cor	poration Service Company
	(Name)
120	1 Hays Street
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tall	lahassee FL 32301
	City/State/Zip
liability company at the agent and agree to acrelating to the proper	as registered agent and to accept service of process for the above stated limited the place designated in this certificate, I hereby accept the appointment as registered in this capacity. I further agree to comply with the provisions of all statutes and complete performance of my duties, and I am familiar with and accept the ition as registered agent as provided for in Chapter 608, Florida Statutes. ice Company (Signature) Harry B. Davis Asst. Vice President

\$ 100.00 Filing Fee for Application

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CP/IPERS PLANTATION, 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 TWENTIETH DAY OF OCTOBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CP/IPERS PLANTATION, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF FEBRUARY, A.D. 2006.

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

4115386 8300

081049547

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 6919725

DATE: 10-20-08

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