# M08000004792

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### PORGES, HAMLIN, KNOWLES, PROUTY, THOMPSON & NAJMY, P.A.

#### ATTORNEYS AT LAW

October 28, 2008

(via Federal Express)

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LLIMIT MASTERS IN TAXATION

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STEPHEN W. THOMPSON
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RICHARD A. WELLER
OF COUNSEL:

of Counsel: Harry W. Haskins\*\*\* Shelly A. Gallagher Я

REPLY TO:

Bradenton

Florida Secretary of State
Division of Corporations
Clifton Building
ATTN: AGNUS LUNT, Regulatory Specialist II
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Alliant Tax Credit Fund 45 GP, LLC

OFN: 10022-12

Dear Ms. Lunt:

SECRETARY OF STATE

Pursuant to your telephone conversation with Michael J. Smith, Esq., enclosed are the executed documents for application by a foreign limited liability company for the above-referenced matter. Also enclosed is our firm's trust account check in the amount of \$130.00 for filing and certificate of status for same.

Should you have any questions or need any additional information from our office, please give me a call at your convenience.

Beverly J. Roberge

Sincerely

Legal Assistant to Curtis D. Hamlin, Esq.

E-mail: beverlyr@phkplaw.com

/bjr

Enclosures: as stated

#### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: ALLIAN) TAX CREDIT FO	mited Liability Company)			
The enclosed "Application by Foreign Limited L Florida," Certificate of Existence, and check are liability company to transact business in Florida.  Please return all correspondence concerning this	ciability Company for Authorization to submitted to register the above reference.			
r lease return an correspondence concerning this	matter to the following.			
MICHAEL SMITH, ESQ.				
4)	Name of Person)		-	
PORGES, HAMLIN, ET A	AL.	SEC	2000 OCT 29	
(Firm/Company)		AHA	00.7	T
1205 MANATEE AVENUE WEST		ARY OF	29 AM	FILED
	(Address)	FLO	ۻ	D
BRADENTON, FLORIDA	34205	RIDA	£	
(City/s	State and Zip Code)			
For further information concerning this matter, p	lease call:			
MICHAEL SMITH	at (941 ) 748-3770			
(Name of Person)	(Area Code & Daytime Telepho	ne Num	ber)	
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount:  \$\Bigsim \frac{1}{2}\$130.00 Filing Fee & Certificate of the following amount:		iling Fee, of Status &		

## 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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. ALLIANT TAX CREDIT FUND 45 GP, 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 writte 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 N/A
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. OCTOBER 14, 2008 (Date of Organization)  5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 340 ROYAL POINCIANA WAY, SUITE 305 본유 불
PALM BEACH, FLORIDA 33480  (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:
ALLIANT CAPITAL, LTD.
340 ROYAL POINCIANA WAY, SUITE 305
PALM BEACH, FLORIDA 33480
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 oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: To act as general partner
for Alliant Tax Credit Fund 45, Ltd., a Florida limited partnership
The Miles
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.)  Curtis D. Hamlin

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	f the Limited Liability Company is:		
ALLIANT 1	TAX CREDIT FUND 45 GP, LLC		_
If name unavail	lable, the alternate name to be used in the state of Florida is:	•	
2. The name ar	nd the Florida street address of the registered agent and office are:	ZOON OCT SECRET	autoria
	CURTIS D. HAMLIN, ESQ.		<u> </u>
	(Name)	29 ARY I	1
	1205 MANATEE AVENUE WEST	AM 9: OF STI	O
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	ATE ORIDA	
	BRADENTON, FLORIDA 34205 FL		
	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.

gnature)

\$ 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

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALLIANT TAX CREDIT FUND 45 GP, 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-EIGHTH DAY OF OCTOBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALLIANT TAX CREDIT FUND 45 GP, LLC" WAS FORMED ON THE FOURTEENTH DAY OF OCTOBER, A.D. 2008.

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

4611691 8300

081071337

Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 6935509

DATE: 10-28-08

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