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EXAMINER





ACCOUNT NO. : 072100000032

REFERENCE : 822302

2302 431263

AUTHORIZATION :

COST LIMIT : \$ 130

ORDER DATE: December 11, 2008

ORDER TIME : 12:56 PM

ORDER NO. : 822302-155

CUSTOMER NO: 4312639

FOREIGN FILINGS

NAME:

CENTRO NP RESIDUAL

BROOKSVILLE SQUARE, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
YELD COPY
CERTIFIED COPY

XX 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: 1 Centro NP Residual Brooksville Square, 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 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 5 Perpetual 4 December 4, 2008 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") December 12, 2008 (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 420 Lexington Avenue, New York, NY 10170 (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 follow New Plan Florida Holdings, LLC c/o Centro Properties Group 420 Lexington Avenue New York, NY 10170 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: Real Estate Owner/Acquisition Signature of a member or an authorized representative of a member. (In accordance with section 608 408(3), E.S., the execution of this document constitutes an affirmation under the penalties of policy that the facts stated herein are true.)

Steven Siegel Executive Vice President of

New Plan Florida Holdings, 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	f the Limited Liability Company is:	
Centro NP Re	esidual Brooksville Square, LLC	
If name unavail	lable, the alternate name to be used in the state of Florida is:	
2. The name an	nd the Florida street address of the registered agent and office are:	
	Corporation Service Company	
	(Name)	•
	1201 Hays Street	
	Florida Street Address (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: Conclude

(Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CENTRO NP RESIDUAL BROOKSVILLE SQUARE, 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 ELEVENTH DAY OF DECEMBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTRO NP RESIDUAL BROOKSVILLE SQUARE, LLC" WAS FORMED ON THE FOURTH DAY OF DECEMBER, A.D. 2008.

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

4629769 8300

081184901

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 7016649

DATE: 12-11-08

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