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### FLORIDA/FOREIGN LIMITED LIABILITY CO.

Doral RI Phase LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 0        |
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JUN 29 2009

**EXAMINER** 

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1             | Dorn! R! Phase LLC   | V & 11 & 11 & 11   |            |
|---------------|--|--|------------|
|               | (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.)   | L <sub>i</sub> C <sub>3</sub> " of "LLC;"}                 |            |
| consei        | ame unavailable, enter alternate name adopted for the purpose of transacting business in Florida at<br>ent of the managers or managing members adopting the alternate name. The alternate name must in<br>pany," "L.L.C," "LLC.")  | nd attach a copy of the written include "Limited Liability |            |
| 2.            | Delaware 3, 27-0425798   |  |            |
| COII          | orisdiction under the law of which foreign limited liability (FEI number, if appunpany is organized)   | ilicable)  |            |
| 4             | June 23, 2009 5. Perpetual   |  |            |
|               | (Date of Organization) (Duration: Year limited liability of exist or "perpetual")  | company will cease to                                      |            |
| 6. <u>Ս</u> յ | Ipon qualification   |  |            |
|               | (Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)  | C  | )          |
| 7. <u>2</u> 4 | 45 Park Avenue, 2nd Floor  |  | <u> </u>   |
| N             | New York, NY 10167   | IIL 6  |            |
|               | (Street Address of Principal Office)   | N =  |            |
| o 11          | f limited liability company is a manager-managed company, check here   | ر<br>م   |            |
| Ø, 11         | I minited flatifity company is a manager-managed company, oneck note   |  | =          |
| 9. TI         | The name and usual business addresses of the managing members or managers are  | e as follows: 🙃 🚆  |            |
| К             | Koala Minni Realty Holding Co., Inc.   | မ္   | 크는<br>기(하. |
| -<br>!        | P.O. Box 5005  |  |            |
| N             | New York, NY 10163   |  |            |
| thejur        | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offici<br>inscliction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in<br>lation of the certificate under oath of the translator must be submitted.) | ial having custody of records in<br>a foreign language, a  |            |
| 11. 1         | Nature of business or purposes to be conducted or promoted in Florida:   |  |            |
|               | To hold title to real property for a tax exempt pension trust.   |  |            |
|               | In 13. D12   |  |            |
|               | Signature of a member or an authorized representative of a median 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 berein are true.)  Koala Mismi Realty Holding Co., Inc.                         | mber.<br>tutes   |            |
|               | By: Joseph B. Dobronyi, Jr., Vice President  | <u> </u>   |            |
|               | Typed or printed name of signec  |  |            |

## 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 POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

|  | Domi R1 Phase LLC   |  |  |
|--|---|--|--|
| If unavailable, the alternate to be used in the state of Florida is:         |   |  |  |
| 2. The name at   | nd the Florida street address of the registered agent and office are:   |  |  |
| •  | C T Corporation System  |  |  |
|  | (Name)  |  |  |
|  | 1200 South Pine Island Road   |  |  |
|  | Florida Street Address (P.O. Box NOT ACCEPTABLE)  |  |  |
|  | Plantation FL 33324   |  |  |
|  | City/Stato/Zip  |  |  |
| liability compar<br>agent and agree<br>relating to the p<br>obligations of n | med as registered agent and to accept service of process for the above stated limited by at the place designated in this certificate, I hereby accept the appointment as registered to act in this capacity. I further agree to comply with the provisions of all statutes proper and complete performance of my duties, and I am familiar with and accept the try position as registered agent as provided for in Chapter 608, Florida Statutes.  Corporation System (Signature) |  |  |
|  | \$ 100.00 Filing Fee for Application  |  |  |
|  | \$ 25.00 Designation of Registered Agent  |  |  |

\$ 30.00 Certified Copy (optional)

Certificate of Status (optional)

5.00

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DORAL R1 PEASE 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-FIFTH DAY OF JUNE, A.D. 2009.

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

4701755 8300

090650214

AUTHENTY CATION: 7385034

DATE: 06-25-09

You may verify this cortificate onlin