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**EXAMINER** 

10 FEB 23 PM 2: 32

FILED STATE STATE STATE CORPORATIONS



ACCOUNT NO. : I2000000195

REFERENCE : 293458 4327719

AUTHORIZATION :

COST LIMIT : \$ 125 \ OA

ORDER DATE : February 23, 2010

ORDER TIME : 12:16 PM

ORDER NO. : 293458-005

CUSTOMER NO: 4327719

#### FOREIGN FILINGS

NAME: NGP V MIRAMAR FL LLC

XXXX QUALIFICATION (TYPE: LL)

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

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. NGP V Miramar FL 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 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. January 29, 2010 5. Perpetual (Date of Organization) (Duration: Year limited liability company will cease to 6. (Business not yet commenced) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 1750 Tysons Boulevard, Suite 220 McLean, Virginia 22102 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here X 9. The name and usual business addresses of the managing members or managers are as follows: Manager: NGP V Management LLC 1750 Tysons Boulevard, Suite 220 McLean, Virginia 22102 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: Owning and leasing of real property Signature of a member or an authorized representative of a member.

David M. Lautenberger, Authorized Person

(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.)

## 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 Lir	nited Liability Co	mpany is:	
NGP V Miramar FL	. LLC		
If name unavailable, th	e alternate name t	o be used in the state of Florida is:	
2. The name and the F	orida street addre	ess of the registered agent and office are:	
Corpo	oration Service	Company (Name)	
1201	Hays Street		_
	Florida Street A	Address (P.O. Box <u>NOT</u> ACCEPTABLE)	
Tallal	nassee	<sub>FL</sub> 32301	
<del></del>		City/State/Zip	-
		ad to account account a consider of account for the above of	

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:

Sue G. Knight
as its agent

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

# Delaware

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NGP V MIRAMAR FL 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-NINTH DAY OF JANUARY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NGP V MIRAMAR FL LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JANUARY, A.D. 2010.

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

4783011 8300

100088524

AUTHENTY CATION: 7788000

DATE: 01-29-10

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