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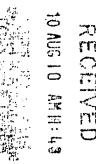
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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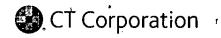
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B. KOHR
AUG 1 0 2010

EXAMINER

SECRETARY OF STATE DIVISION OF CORPORATIONS



1203 Governors Square Blvd. Tallahassee, FL 32301-2960 850 222 1092 tel 850 878 5368 fax www.ctlegalsolutions.com

August 10, 2010

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re: Order #: 7908559 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Simon FMA, LLC (DE) Registration Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Christina McNeair
CL Operations Specialist
Christina.McNeair@wolterskluwer.com

August 10, 2010

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301



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CL Operations Specialist
Christina.McNeair@wolterskluwer.com

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Simon FMA, LLC (Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Tracy L. Reinholt

	(Name of Person)	
Simon Property Group,	Inc.	
	(Firm/Company)	
225 W. Washington	St., P.O. Box 7033	
	(Address)	
Indianapolis, IN 4620	07-7033	
(Cit	ty/State and Zip Code)	
further information concerning this matter	; please call:	
Tracy L. Reinholt	at (317) 263-7131	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS: STREET ADDRESS:		
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
closed is a check for the following amount: \$\Boxed{15}\$125.00 Filing Fee \$\Boxed{130.00 Filing Fee}\$ Certification:		

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATS LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TR	TIES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN HE STATE OF FLORIDA:
1 Simon FMA, LLC	6
(Name of Foreign Limite	d Liability Company)
2 Delaware	6
(Jurisdiction under the law of which foreign limited liability company is organized)	d Liability Company) 3. (FEI number, if applicable)
4. August 10, 2010	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	
(Date first transacted business in (See sections 608.501 & 608.502 F	Florida, if prior to registration.) .S. to determine penalty liability)
7. c/o Corporate Paralegal, 225 W. Wash	nington St., P.O. Box 7033
Indianapolis, IN 46207-7033	
	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
9. The name and usual business addresses of the ma	anaging members or managers are as follows:
Member: Coconut Point Developers, LLC, 225 V	V. Washington Street,
Indianapolis, IN 46207-7033	
· · ·	
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photocotranslation of the certificate under oath of the translator must be so	
11. Nature of business or purposes to be conducted	or promoted in Florida: real estate

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 Limited Liability Company is:		
Simon FMA, LLC		
2. The name and the Florida street address of the registered agent and office are:		
CT Corporation System		
(Name)		
1200 South Pine Island Road		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Plantation FL 33324		
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.

Chris McNeair
Assistant Secretary

\$ 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 3

The First State

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

DELAWARE, DO HEREBY CERTIFY "SIMON FMA, 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 TENTH DAY OF AUGUST, A.D. 2010.

3312631 8300

100814840

peffrey W. Bullock, Secretary of State AUTHENTICATION: 8162683

DATE: 08-10-10

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