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DEPARTMENT OF STATE

DIVIDION OF CORPORATIONS

B. KOHR
OCT - 8 2010
EXAMINER

TO OCI -8 PH 24 45



ACCOUNT NO. : I2000000195

REFERENCE : 53645

536459 481423

AUTHORIZATION :

COST LIMIT : \$ 160.00

ORDER DATE: October 8, 2010

ORDER TIME : 1:14 PM

ORDER NO. : 536455-005

CUSTOMER NO: 4814233

FOREIGN FILINGS

NAME: AP WP TERRAZAS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

____ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

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 PORE
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
AP WP Terrazas 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 wri 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.
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. September 28, 2010 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 2 Manhattanville Road, Suite 203
Purchase, New York 10577
(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:
AP Terrazas LLC
c/o AREA Property Partners, L.P.
2 Manhattanville Road, Suite 203, Purchase, New York 10577
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record 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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: To conduct any and
all business not prohibited to LLCs, including real estate ownership and management
Melina Merly
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.)

Typed or printed name of signee

Melissa Merlo, Authorized Representative

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.

	ne of the Limited Liability Co errazas LLC	mpany is:	
If name una	available, the alternate name t	o be used in the state of Florida is:	
2. The nam	ne and the Florida street addre	ss of the registered agent and office are:	
	Corporation Service	Company	
	(Name)		_
	1201 Hays Street		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		***************************************
	Tallahassee	_{F1} 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: Carina L. Dunlap
Asst. Vice President

\$ 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 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "AP WP TERRAZAS 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 EIGHTH DAY OF OCTOBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AP WP

TERRAZAS LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF SEPTEMBER,

A.D. 2010.

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

4878152 8300

100980378

Jeffrey W. Bullock, Secretary of Sta AUTHENTYCATION: 8277847

DATE: 10-08-10

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