

M10000004695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

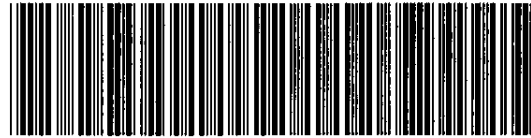
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/12/10--01009--025 **125.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 22 PM 1:51

T. HAMPTON

OCT 25 2010

EXAMINER

Handwritten: 470987-0107

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 10051549 Decomar Miami Beach 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:

Nadene McGuire, Paralegal
(Name of Person)

Polsinelli Shughart PC
(Firm/Company)

700 West 47th Street, Suite 1000
(Address)

Kansas City, MO 64112
(City/State and Zip Code)

For further information concerning this matter, please call:

Nadene McGuire at (816) 360-4326
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy



Nadene M. McGuire
(816) 360-4326
nmcguire@polsinelli.com

700 West 47th Street, Suite 1000
Kansas City, MO 64112
(816) 753-1000
Facsimile: (816) 753-1536
www.polsinelli.com

October 8, 2010

Florida Secretary of State
Corporation Division
P.O. Box 6327
Tallahassee, FL 32314

Re: 10051549 Decomar Miami Beach LLC

Dear Ladies and Gentlemen:

Enclosed are the following documents for the above-referenced limited liability company that we are forwarding to you for processing:

1. Cover Letter
2. Application for Foreign Authorization.
3. Certificate of Good Standing from Delaware Secretary of State.
4. Check in the amount of \$125.00 to cover the filing fee.

Please forward evidence of filing of the document to the undersigned.

If you have any questions, please let us know.

Very truly yours,

Nadene M. McGuire
Paralegal

NMM
Enclosures

025319/400870-1893435.1



Nadene M. McGuire
(816) 360-4326
nmcguire@polsinelli.com

700 West 47th Street, Suite 1000
Kansas City, MO 64112
(816) 753-1000
Facsimile: (816) 753-1536
www.polsinelli.com

October 20, 2010

Florida Secretary of State
Corporation Division
P.O. Box 6327
Tallahassee, FL 32314

Re: 10051549 Decomar Miami Beach LLC

Dear Ladies and Gentlemen:

Enclosed is the Application for Foreign Authorization for the above-referenced limited liability company that we are returning to you for processing. Pursuant to your request (copy enclosed), also enclosed is a Certificate of Designation of Registered Agent/Registered Office for the limited liability company.

Please forward evidence of filing of the Application to the undersigned.

If you have any questions, please let us know.

Very truly yours,

Nadene M. McGuire
Paralegal

NMM
Enclosures

025319/400870-1896463.1

Faint, illegible text, possibly a stamp or bleed-through from the reverse side of the page.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

10 OCT 22 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 13, 2010

NADENE MCGUIRE, PARALEGAL
POLSINELLI SHUGHART PC
700 W 47TH ST - STE 1000
KANSAS CITY, MO 64112

SUBJECT: 10051549 DECOMAR MIAMI BEACH LLC
Ref. Number: W10000048044

We have received your document for 10051549 DECOMAR MIAMI BEACH LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 810A00024223

**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. 10051549 Decomar Miami Beach 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 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. September 2, 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. 911 Main Street, Suite 1500, Kansas City, MO 64105
(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 follows:

KeyCorp Real Estate Capital Markets, Inc., 911 Main Street, Suite 1500, Kansas City, MO 64105

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: To engage in any lawful act or activity for which limited liability companies may be organized under the Florida Limited Liability Company Act.

KEYCORP REAL ESTATE CAPITAL MARKETS, INC., an Ohio corporation, solely in its capacity as special servicer and authorized agent for the Member under the Pooling and Servicing Agreement, its Manager

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.)

By: David S. Boswell

Name: DAVID S. BOSWELL
Title: VICE PRESIDENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 22 PM 1:51

**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:

10051549 Decomar Miami Beach LLC

If name unavailable, the alternate name to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

NRAI Services, Inc.

(Name)

2731 Executive Park Drive, Suite 4

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Weston

FL 33331

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.

NRAI Services, Inc.

By: 

(Signature)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 22 PM 1:51

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "10051549 DECOMAR MIAMI BEACH 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 "10051549 DECOMAR MIAMI BEACH LLC" WAS FORMED ON THE SECOND DAY OF SEPTEMBER, A.D. 2010.


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

4868143 8300

100980687

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8278002

DATE: 10-08-10