FILE No.189 11/01 '11 15:34

ID:BILZIN,SUMBERG

FAX:3053747593

PAGE 1/ 4

Page 1 of 1

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000238022 3)))



H100002380223ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

(850)617-6383

From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number: 075350000132 Phone: (305)374-7580 Fax Number: (305)351-2122

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

TO NOV - 1 PM 4: 13.
SECRETARY OF STATE

Foreign Limited Liability Company
MIAMI DESIGN DISTRICT ASSOCIATES MANAGER, LLC

Certificate of Status	1
Certifled Copy	1
Page Count	04
Estimated Charge	\$160.00

UNOV - I AH ID: 00

GRETARY OF STATE

AHASSEF EI DEIDA

J. SAULSBERF EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

NOV _ 2 2010

H10000238022 3

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 Miami Design District Associates Manager, 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. Dolaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. 7/23/10 5. perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 3841 N.E. 2nd Avenue, Suite 400, Mismi, Florida 33137 (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: Miami Design District Associates, LLC, a Delaware limited liability company 3841 N.E. 2nd Avenue, Suite 400, Miami, Florida 33137 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. 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 I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.)

Linda Ebin, Authorized Representative

Typed or printed name of signee

H10000238022 3

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 C	• -		
Mismi Design District Associates Manager, Li			
If unavailable, the alternate to be used i	n the state of Florida is:		
2. The name and the Florida street add	ress of the registered agent and office are:		
Craig Robins		2010 NOV SEGRETAF	
	(Name)	### - F	
3841 N.E. 2nd Avenue, Suit	e 400	the - E	,
Florida Stree	Address (P.O. Box NOT ACCEPTABLE)	AM :: 00 F STATE FLORIDA	
Miami	FL 33137		
	City/State/Zip		
The day have a man of the party of the same		and the section	

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 figure 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.

ву:			
Craig	Robina	(Signa	iture)
		100.00	Filing Fee for Application
	\$	25.00	Designation of Registered Agent
	\$	30.00	Certified Copy (optional)
	\$	5.00	Certificate of Status (optional)

H10000238022 3

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "MIAMI DESIGN DISTRICT ASSOCIATES

MANAGER, 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 FIFTEENTH DAY

OF OCTOBER, A.D. 2010.

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

SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

H10000238022 3

4851914 8300

100999467

You may verify this certificate online at corp.delawers.gov/authver.shtml Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 8292003

DATE: 10-15-10