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EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE : 627606

7496912

AUTHORIZATION :

COST LIMIT :

ORDER DATE: December 29, 2010

ORDER TIME : 2:36 PM

ORDER NO. : 627606-005

CUSTOMER NO: 7496912

FOREIGN FILINGS

NAME: FFM TAMPA, 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: 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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

navailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability" "L.L.C." "LLC." Vare 3. 101206323 thou nuder the law of which foreign limited liability is organized) 7/2010 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") e (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1 Aiken Court, Leasing Office Oa, Florida 33615 (Street Address of Principal Office) ted liability company is a manager-managed company, check here ame and usual business addresses of the managing members or managers are as follows: m Freeman	
(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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited L'Company," "L.L.C," "LLC.")	the written ability
2. Delaware 3 101206323	
4. 12/17/2010 5. Perpetual	
	C
6. None	5
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	DEC 2
7. 8401 Alken Court, Leasing Office	·o
Tampa, Florida 33615	
(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:	
Chaim Freeman	. <u>-</u>
117 N. Fuller Avenue	<u> </u>
Los Angeles, CA 90036	,
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language ranslation of the certificate under oath of the translator must be submitted.)	
1. Nature of business or purposes to be conducted or promoted in Florida: Real estate	
investment	
Voer lend	 '
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 s.817.155, F.S.)	
Rosemary Lemmis	

Typed or printed name of signee

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.

Limited Li	ability Compar	ny is:		
TAMPA,	LLC			
lternate to	be used in the	state of Florid	a is:	
e Florida s	treet address of	f the registered	l agent and office are:	
CORPO	RATION SE	RVICE CON	MPANY	_
		(Name)		
1201	HAYS STRI	EET		_
Flo	orida Street Addre	ss (P.O. Box N	OT ACCEPTABLE)	•
TALL	AHASSEE	FL	32301	_
		City/State/Zip		
	TAMPA, Iternate to e Florida si CORPO	TAMPA, LLC Iternate to be used in the second street address of CORPORATION SE	ternate to be used in the state of Florida e Florida street address of the registered CORPORATION SERVICE COM (Name) 1201 HAYS STREET Florida Street Address (P.O. Box MOTALLAHASSEE FL	TAMPA, LLC Iternate to be used in the state of Florida is: e Florida street address of the registered agent and office are: CORPORATION SERVICE COMPANY (Name) 1201 HAYS STREET Florida Street Address (P.O. Box NOT ACCEPTABLE)

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.

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

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FFM TAMPA, 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 DECEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FFM TAMPA, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 2010.

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

4915130 8300

101243874

AUTHENTICATION: 8458501

DATE: 12-29-10

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