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Division of Corporations

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J. SAULSBERRY **EXAMINER**

MAR 0 2 2011

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THE CO

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

1. PRLP Partner, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Corr	ppany," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business is consent of the managers or managing members adopting the alternate name. The alternate company," "L.L.C," "LLC.")	
2. Delaware 3.	
2. Delawate 3. (FEI num company is organized) (FEI num	ber, if applicable)
4. February 4, 2011 5. Perpenual	
(Date of Organization) (Duration: Year limite exist or "perpetual")	d liability company will cease to
6.	7A.
(Date first transacted business in Florida, if prior to registration (See sections 608.501 & 608.502 F.S. to determine penalty liabi	a.) AR B
7. c/o Corporate Paralegal, 225 W. Washington St., P.O. Box 7033, Indianapolis, IN 46207-7033	
	Mo
(Street Address of Principal Office)	F.S.
8. If limited liability company is a manager-managed company, check here	TATE ORIGINAL
9. The name and usual business addresses of the managing members or man	lagers are as follows:
Prime Outlets Acquisition Company LLC, 225 W. Washington St., P.O. Box 7033, Ind	ianapolis, IN 46207-7033
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certanslation of the certificate under outh of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida:	tificate is in a foreign language, a
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 constitution of the penalties of perjury that the firsts stated herein are true. I am aware that any false document to the Department of State constitutes a third degree felony as programment. Barkley, Authorized Representative of the	oves an affirmation under the e information submitted in a rovided for in s.817.155, F.S.)

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.

1. The name of the Limited Liability Company is:	
PRLP Partner, LLC	
If unavailable, the alternate to be used in the state of I	lorida is:
2. The name and the Florida street address of the regi	#E & _
C T Corporation System	AR -
(Name	OF STATE OX NOT ACCEPTABLE)
Florida Street Address (P.O. B	OX NOT ACCEPTABLE)
Plantation	L 33324
City/Su	te/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.

GT Corporation System James M. Halpin

Assistant Secretary

(Signifure)

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

COVER LETTER

	istration Section sion of Corporations				
SUBJECT:	PRLP Partner, LLC				
•		Name of Limited Liability Compa	iny		
The enclosed Existence, and	"Application by Foreign Limid check are submitted to regist	ted Liability Company for Authorizati er the above referenced foreign limited	on to Transact Business in Florida," d liability company to transact busin	Certificate ess in Flori	of da
Please return	all correspondence concerning	this matter to the following:			
	Tracy L. Reinholt				
		Name of Person			
	Simon Property Group				
		Firm/Company	······································		
	225 W. Washington St.			26	
		Address	Fö	Ξ	
	Indianapolis, IN 46204		AHA	2011 MAR - 1	
		City/State and Zip Code	SSE	<u> </u>	
	treinholt@simon.com		me		
	E-mail ad	dress: (to be used for future annual rep	port notification)		
For further inf	formation concerning this matt	er, please call:	port notification) ORDA	AM II: 34	
Tracy	L. Reinholt	at (^{3 7})	263-7131		
	Name of Person	Area Code & Daytime Te	elephone Number		
Divis Regi	LING ADDRESS: sion of Corporations stration Section	STREET ADDRESS: Division of Corporations Registration Section			
	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Center Circl Tullahassec, FL 32301	ie.		
Enclosed is	a check for the following .00 Piling Fee \$130.00 F. Certificate	iling Fee & \$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy	ė	

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PRLP PARTNER, 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 FIRST DAY OF MARCH, A.D. 2011.

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

2011 MAR - 1 AM 11: 34
SECRETARY OF STATE

4936505 8300

110241287

UTHENTY CATION: 8590263

DATE: 03-01-11

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