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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Email Address:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222~1092 Fax Number : (850)878-5368

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

Foreign Limited Liability Company MEPT SAWGRASS CENTER LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

J. BRYAN

APR 19 2011

EXAMINER

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

IN COMPLIANCE WITH SECTION 608508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECESTER A FOREIGN LIMITED LIBITLY COMPANY TO TRANSACT BY ISINESS, IN THE STATE OF FLORIDA.

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1. MEPT Sowgrass Center LLC		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," or "LLC.")		
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and strach a copy of the wri		
consant of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability		
Company," "LL.C," "LLC.")		
2. Delaware 3. 45-1605212		
(Jurisdiction under the law of which foreign limited liability (FE) number, if applicable) company is organized)		
4. April 5, 2011 5. Perpetual (Date of Organization) (Duration: Year limited liability company will const to		
4. April 5, 2011 (Date of Organization) (Direction: Year Illustration liability company will const to exist or "perpetual")		
Z NA		
(Date first transacted business in Florida, if prior to registration.)		
(See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. c/o NewTower Trust Company		
O		
3 Bethesda Metro Contor, Suite 1600; Bethesda, MD 20814		
(Street Address of Principal Office)		
8. If limited liability company is a manager-managed company, check here 🔀		
as a second southern as a superaffer any board attack and a CA		
9. The name and usual business addresses of the managing mombers or managers are as follows:		
Many by a series of the series		
MEPT Edgemoor REIT LLC, Manager		
c/o NewTower Trust Company		
3 Bethesda Metro Center, Suite 1600; Bothesda, MD 20814		
10. Amahadi ana ini anggara sini ana ang ang ang ang ang ang ang ang ang		
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		
panalation of the cartificate major outh of the translator must be arbitrated)		
·		
11. Nature of business or purposes to be conducted or promoted in Florida: Own real property for		
investment purposes, and any other inwitil business.		
(see attached signature page)		
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 possibles of perjury that the facts stated herein are true 1 art aware that any false information submitted in a		
document to the Department of State constitutes a third degree follows as provided for in s.817.155, F.S.)		
(see attached signature page)		
Typed or printed name of signee		

Signature page to Application by Foreign Limited Liability Company For Authorization to Transact Business in Florida by MEPT Sawgrass Center LLC

Signature of a member or an authorized representative of a member.

MEPT Sawgrass Center LLC

MEPT Edgemoor Operating LP, its Solo Member

By:

Authorized Representative

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, PLORIDA STATUTES, THE UNDERSKINED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

MEPT Sawgrass Center LLC If unavailable, the alternate to be used in the state of Florida is: 2. The name and the Florida street address of the registered agent and office are: CT Corporation System (Nama) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation PL 33324 City/State/Zip	I. The name of the Limited Liability	Company is:	
2. The name and the Florida street address of the registered agent and office are: CT Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation PL 33324	MEPT Sawgrass Center LLC		——————————————————————————————————————
CT Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation PL 33324	If unavailable, the alternate to be used	1 in the state of Florida is:	
(Name) 1200 South Pine Island Road Plorida Street Address (P.O. Box NOT ACCEPTABLE) Plantation PL 33324	2. The name and the Florida street ad	dress of the registered agent and office are:	TALLAS TO
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Plantation PL 33324		,	
Plantitudion PL 33324	1200 South Pine Island Re	oxd	
Plantition PL 33324	Plorida Str	cet Address (P.O. Box NOT ACCEPTABLE)	Trong ::
City/State/Zip	Plantation	PL 33324	ATE ARIOS
- Francisco de la companya del companya de la companya del companya de la company		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.

By: CT Corporation System

(Signature)

Concor Culen, ASSA: Secretary

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

Delaware

D2/C# 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MEPT SANGRASS CENTER 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 EIGHTEENTH DAY OF APRIL, A.D. 2011.

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

11 APR 18 AM 7: 50
SECRETARY OF STATE
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You may varify this certificate online at corp. delaware, gov/authvar. shtml

AUTHENTY CATION: 8701068

DATE: 04-18-11