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MAY 27 2011

EXAMINER

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COVER LETTER

SUBJECT: R	teleted Corporate XXXI SLP LLC			
		Name of Limited Liability Company		
The enclosed "Existence, and	Application by Poreign Limited L check are submitted to register th	iability Company for Authorization to Transact Business in Florida," C e above referenced foreign limited lia silty company to transact busines	loulficate of is in Florida.	
Please return a	ll carrespondence concerning this	matter to the followlag:		
	Steven Beede	<u> </u>		
		Name of Person		
	Centertine Cupital Group Inc.			
	Firm/Company			
	625 Madison Avenue			
		Address		continui
	Now York, NY 10022		HAS	1
	-	City/State and Zip Code	35.5 72.5 9.0	1
	sbeede@conterling.com			1
	F-mail addres	s: (to be used for future annual ropor: notification)	and one,	
For further lafe	ormation concerning this matter, p	elease call:	9: 56 GRIDA	
Stever	1 Beede	al (212) 585:-2176	-	
	Name of Person	Aren Code & Daytime Telephone Number		•
Divisi Rogisi P.O. E	LING ADDRESS: ion of Corporations tration Section Section Section 132314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	a check for the following nm 00 Filing Fee \$\int_{\text{Certificate of}}\$	Fee & S155.00 Filing Fee & \$160.00 Filing Fee, Centificate		;

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

IN COMPLIANCE WITH SECTION 608303, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LUBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Related Corporate XXXI SLP LLC-Series B (Name of Foreign Limited Liability Company; must include		
(Tallite de l'oragin Dallinos Dibbins) Campany, indui interio	the introduction Company, Edition of Eco.	,
(If name unavailable, enter alternate name adopted for the purpos consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy- mate name. The alternate name must include "Limited	of the written Lability
2. Delaware 3.		
(Jurisdiction under the taw of which foreign limited limbility company is organized)	(FEI number, if applicable)	
4. November 2, 2005 5.	2055	
(Date of Organization)	(Duration: Year limited liability company will cea exist or "perpetual")	su to
6.		<u> </u>
(Date first transacted business in Plot (See sections 608.501 & 608.502 F.S.)	rida, If prior to registration.) to determine penalty Hability)	
7. 625 Madison Avenue, 5th Flour		
New York, NY 10022		3356
(Street Address o	i Principal Office)	
 If limited liability company is a manager-managed of The name and usual business addresses of the mana 	_	CONTRACTOR OF SECONDARY
Centerline Manager LL.C, 625 Madison Avenus, 5th Floor, N	ew York, NY, 1002?	
10. Attached is an original certificate of existence, no more than 90 da the jurisdiction under the law or which it is organized. (A photocopy translation of the certificate under outh of this translator must be salism	is not acceptable. If the certificate is in a foreign language	
11. Nature of business or purposes to be conducted or	promoted in Florida; Real Estate Management	
(in accordance with section 608,408(3), F.S., the execution penalties of purpary that the facts stated herein aneurae document to the Department of State constitutes and the Chile S. Chile Chile Chile S. Chile Chile Chile S. Chile Chile Chile S.		 -
Typed or printed	minue of gigues	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, 1HE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability Comp RPORATE XXXI SLP LLC-SER	•	
If unavailable,	, the alternate to be used in the	state of Florida is:	
2. The name i	and the Florida street address of	of the registered agent and office are:	
	C T Corporation System		
		(Name)	
	1200 South Pine Island Road		
	Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)	
	Plautation	FL 33324	A
		City/State/Zip	
liability compo agent and agre relating to the	my at the place designated in the es to act in this capacity. I find proper and complete performa	his certificate, I hereby accept the appointment as registrate her agree to comply with the provisions of all statutes nee of my duties, and I am familiar with and accept the as provided for in Chapter 608, Florida Statutes.	Sign N
	Banne Me	· Cart hy	·
	(Signs		
	ል ላልለ ለጠ	Assistant Secretary	:
	\$ 100.00 \$ 25.00	Filing Fee for Application Designation of Registered Agent	
	\$ 30.00	Certified Copy (optional)	·

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RELATED CORPORATE XXXI SLP LLC-SERIES B" 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-FIFTH DAY OF MAY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4053726 8300

110624130

AUTHEINTY CATION: 8788750

DATE: 05-25-11

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