Page 1 of 1

Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

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(((H11000149072 3)))



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Division of Corporations

Fax Number : (850)617-6383 *RE-SUBMIT*

From:

Account Name : C T CONSTITUTE TEICH ONGING THING

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

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Foreign Limited Liability Company 401 East Las Olas LLC

Certificate of Status	0
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Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corp.			
Subje	Cr. 401 Bast Lac	s Olas LLC		
	<u></u>		Name of Limited Liability Company	
			dability Company for Authorization to Transact Business in least over referenced foreign limited liability company to trans-	
Please i	return all correspor	ndence concerning this	matter to the following:	
	Catherin	is O'Doherty		
			Name of Person	
	Stroock	& Stroock & Lavan, L	LP	
	\$-0.00 PE-1		Firm/Company	
	180 Mai	den Lane		
			Address	
	New Yo	rk, NY 10038		
			City/State and Zip Code	
	codolien	y@stroock.com		
	*****	E-mail addres	s: (to be used for future annual report notification)	ALI SE
Por furt	ther information co	procerning this matter, p	oleaso call:	A E T
	Cathorine O'Doh	erty	at (212) 806-5991	100 P
	<u> </u>	Name of Person	Area Code & Daytime Telephone Number	
	MAILING ADI Division of Corp Registration Sect P.O. Box 6327 Tallahassee, FL	orations tion	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, PL 32301	H 7:51 F STATE FLORIDA
	sed is a check fo]\$125.00 Filing P	or the following am ee \$130,00 Filing Certificate of	Poo & \$155.00 Filing Fee & \$160.00 Filing Fee, 0	

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 LIBRILITY COMPANY TO TRANSACT RESIDENS. IN THE STATE OF FLORIDA:

(If	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") f name unavailable, enter elternate name adopted for the purpose of transacting business in Florida and attach a copy of the	writte	on
Co	nisent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil company," "L.L.C," "LLC.")	ity	
	Delaware [Jurisdiction under the law of which foreign limited liability company is organized) 3. 36-4701902 [FEI number, if applicable]	-	
4.	5. perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	•	
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	•	
7,	New York, NY 10017	•	
	(Street Address of Principal Office)	•	
8,			Ť.
9.	. The name and usual business addresses of the managing members of managers are as follows.	7	TO RESIDE
	401 East Las Olas Acquisition LLC		
	270 Park Avenue, 7th Floor	.: -:	-
	New York, NY 10017		
the tra	 Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receiptrisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under each of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: To hold title to property 	ezorets	'n
	Ollen	,	
	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 lieutein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree followy as provided for in s.817.155, F.S.) Ethel Gavrilova - Authorized Person		
	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 th	e Limited Liability C	Company is:	
401 East Las Olas Li	c		
If unavailable, the	alternate to be used i	in the state of Florida is:	·
2. The name and	he Florida street add	ress of the registered agent and office are:	
c.	l' Corporation System		IJ.
_		(Namo)	Taria de la companya
120	00 South Pine Island Roa	·	LAHAH
_	Florida Stree	Address (P.O. Box NOT ACCEPTABLE)	ASSE
P	Antation .	FL 33324	E.F.C
		City/State/Zip	7:51 STATE STATE LORIDA
liability company a agent and agree to relating to the prop obligations of my p	t the place designated act in this capacity. I er and complete perfe	and to accept service of process for the above in this certificate, I hereby accept the appoint further agree to comply with the provisions by mance of my duties, and I am familiar with agent as provided for in Chapter 608, Florial system	intment as registered of all statutes hand accept the
By:	alpe	I Moule	
		Signature)	

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

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "401 EAST LAS OLAS 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 SIXTH DAY OF JUNE, A.D. 2011.

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

SECRETARIE DE STATE

4985702 8300

110692054

verify this costificate online

Jeffrey W. Bullock, Socretary of State

UTHENTY CATION: 8812292

DATE: 06-06-11



June 7, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CATHERINE O'DOHERTY 180 MAIDEN LANE NEW YORK, NY 10038

SUBJECT: 401 RAST LAS OLAS LLC

REF: W11000030921

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II FAX Aud. #: H11000149072 Letter Number: 911A00013829