Division of Corporations Electronic Filing Cover Sheet

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Foreign Limited Liability Company CRP/InSite Biscayne, L.L.C.

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COVER LETTER

	ration Section on of Corporations		,
SUBJECT: C	RP/InSite Biscayne, L.L.C.		
	Nam	ne of Limited Liability Company	
The enclosed "/ Existence, and o	Application by Foreign Limited Liabi check are submitted to register the ab	ility Company for Authorization to Transact Business in Florida," Certificove referenced foreign limited liability company to transact business in l	icate of Florida
Please return al	I correspondence concerning this mat	tter to the following:	
	Stacy M. Rosenthal		
		Name of Person	
	The Carlyle Group		·
		Firm/Company	
	1001 Pennsylvania Ave NW	•	
		Address	
	Washington DC 20004		•
·		City/State and Zip Code	
	stacy.roscnthal@carlyle.com		, Certificate
	B-mail address: (to	o be used for future annual report notification)	
For further info	rmation concerning this matter, pleas	se call:	
Stacy I	Rosenthal	at (202) 729-5251	
	Name of Person	Area Code & Daytime Telephone Number	
Divisio Regista P.O. B	ING ADDRESS: on of Corporations ration Section ox 6327 assee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahussee, FL 32301	
	check for the following amount 0 Filing Fee \$130.00 Filing Fee Certificate of State	e & \$\Bigcip\$155.00 Filing Fee & \$\Bigcip\$160.00 Filing Fee, Certificate	

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:

1. CRP/InSite Biscayne, L.L.C. (Name of Foreign Limited Liability Company; must incl.)	ude "Limited Liability Company," "L.L.C.," or "LL	C.")
(If name unavailable, enter alternate name adopted for the purpo consent of the managers or managing members adopting the alternate Company," "L.L.C." "LLC.")	ose of transacting business in Florida and attach a co ornate name. The alternate name must include "Limi	py of the written ted Liability
2. Delaware	3. 45-2993907	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, If applicable)	
4. 08/11/2011	5. Perpetual	
(Date of Organization)	(Duration: Year Ilmited liability company will exist or "perpetual")	cease to
6 Upon Qualification		
(Date first transacted business in F (See sections 608.501 & 608.502 F.S.		
7. 1001 Pennsylvania Ave NW, Washington DC 20004		 _
	•	
(Street Address	s of Principal Office)	· · · · · · · · · · · · · · · · · · ·
8. If limited liability company is a manager-managed	d company, check here 🔀	
9. The name and usual business addresses of the main	naging members or managers are as follows	:
InSite Miami DT, LLC, 1825 MAIN STREET, SUITE 235	, WESTON FL 33326	
		
		
10. Attached is an original certificate of existence, no more than 90		
the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under cath of the translator must be sub-		grage, a
	•	THE CO
11. Nature of business or purposes to be conducted of	or promoted in Florida: Real estate investment	
		The same of
		The same of the sa
· · · · · · · · · · · · · · · · · · ·	uthorized representative of a member.	
penalties of perjury that the facts stated herein are t	eution of this document constitutes an affirmation under to true. I am aware that any false information submitted as a third degree felony as provided for in s.817.155	inarii es
Stucy M. Rosenthal		•
Typed or printe	ed 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 CRP/InSite Bis	s of the Limited Liability Company is:				
If unavailabl	f 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:	-			
•	C T Corporation System				
	(Name)				
	1200 South Pinc Island Road				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation FL 33324				
	City/State/Zip				
liability compagent and agrelating to the	named as registered agent and to accept service of process for the above stated limited oany at the place designated in this certificate, I hereby accept the appointment as regist aree to act in this capacity. I further agree to comply with the provisions of all statutes be proper and complete performance of my duties, and I am familiar with and accept the first position as registered agent as provided for in Chapter 608, Florida Statutes. CT Corporation System Conne Brya. (Sidnature) Assistant Secretary	erec			
	(Signature) TIDDIDUHE DOGOCOLY \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent				

\$ 30.00

5.00

Certified Copy (optional)
Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRP/INSITE BISCAYNE, L.L.C." 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 EIGHTH DAY OF SEPTEMBER, A.D. 2011.

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

DATE: 09-08-11