MILOCCO5107

| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |

Special Instructions to Filing Officer:

L. SELLERS

OCT 1 2 2011

EXAMINER

Office Use Only



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ECRETARY OF STATE

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:

| . PDE Tornon Eustis Village LLC |
|--|
| 1. BRE Tarpon Eustis Village LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
| • |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wriconsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") |
| 2. Delaware 3 |
| 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) |
| 4. 09/29/2011 5. Perpetual |
| (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6 1 Don Filing |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 7. 345 Park Avenue, New York, NY 10154 |
| |
| (Street Address of Principal Office) |
| O TOTAL A PARIS A CONTRACT OF THE PARIS AND ADDRESS OF THE PARIS AND AD |
| 8. If limited liability company is a manager-managed company, check here |
| 9. The name and usual business addresses of the managing members or managers are as follows: |
| 11 200 11-12 215 1 210 120 121 121 125 |
| Nudeem Meghji, 345 Park Ave, NY NY 10154 |
| |
| |
| |
| 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 |
| translation of the certificate under oath of the translator must be submitted.) |
| 11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate |
| , / |
| |
| |
| Signature of a member or an authorized representative of a member. |
| (In accordance with section 608.408(3), F.S., the execution of His document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I arry aware that any false information submitted in a |
| document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) |
| Nadeem Meghji |
| 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: | | | |
|--|--|--|--|
| BRE Tarpon Eustis Village 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: | | | |
| NRAI Services, Inc. | | | |
| (Name) | | | |
| 515 East Park Avenue | | | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | | | |
| Tallahassee FL 32301 | | | |
| 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 duttes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

NRAI Services, Inc.

| Ву: | 1- | |
|-----|-------------|--------------|
| | (Signature) | |
| | Signature) | , Asst. Say. |

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

FILED 11 OCT 12 PH 2: 10 SECRETARY OF STATE

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BRE TARPON EUSTIS VILLAGE 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 TENTH DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRE TARPON EUSTIS VILLAGE LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF SEPTEMBER, A.D. 2011.

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

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AUTHENTYCATION: 9082226

DATE: 10-10-11

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