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LBV PROPERTY ASSOCIATES LLC

TYPE OF FILING: APPLICATION BY FOREIGN LLC TO TRANSACT BUSIENSS IN FLORIDA

COST:

\$160

RETURN: CERTIFICATE OF STATUS & CERTIFIED COPY

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: LBV PROPERTY ASSOCIATES LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

	Name of Person
c/o Steeprock Capita	al. LLC
	Firm/Company
54 Thompson Stre	et, 4th Floor
	Address
New York, NY 1001	12
	City/State and Zip Code
bucci@steeprock	capital com
E-mail add	dress: (to be used for future annual report notification)
E-mail add	dress: (to be used for future annual report notification)
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E-mail adder information concerning this matter	dress: (to be used for future annual report notification) ter, please call:
E-mail address information concerning this matter. Vanna	dress: (to be used for future annual report notification) ter, please call: at (617) 742-8484 Area Code & Daytime Telephone Number
E-mail add ther information concerning this matter than the second secon	dress: (to be used for future annual report notification) ter, please call: at (617) 742-8484 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations
E-mail add ther information concerning this matter. Vanna Name of Person MAILING ADDRESS: Division of Corporations Registration Section	dress: (to be used for future annual report notification) ter, please call: at (617) 742-8484 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section
E-mail add ther information concerning this matter. Vanna Name of Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	dress: (to be used for future annual report notification) ter, please call: at (617) 742-8484 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building
E-mail add ther information concerning this matter. Vanna Name of Person MAILING ADDRESS: Division of Corporations Registration Section	dress: (to be used for future annual report notification) ter, please call: at (617) 742-8484 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section
E-mail add ther information concerning this matter. Vanna Name of Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	dress: (to be used for future annual report notification) ter, please call: at (617) 742-8484 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
E-mail add ther information concerning this matter. Vanna Name of Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 ed is a check for the following	dress: (to be used for future annual report notification) ter, please call: at (617) 742-8484 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

TRANSACT BUSINESS IN FLORIDA				
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:				
1LBV Property Associates 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 written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")				
2 Delawere 3 45-3733125				
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 45-3733125 (FEI number, if applicable)				
4 November 2, 2011 . S. Perpe-tual				
(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. c/o Steeprock Capital, LLC, 54 Thompson Street, 4th Floor, New York, NY 10012				
(Street Address of Principal Office)				
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:				
Managing Member: SR/CHM LBV 1, LLC				
c/o Steeprock Capital, LLC, 54 Thompson Street, 4th Floor, New York, NY 10012				
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in 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 eath of the translator must be submitted.)				
11. Nature of business or purposes to be conducted or promoted in Florida: To engage in all				
aspects of the commercial real estate business.				
I Summer				
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 penaltics of perjury that the facts stated herein are true. I am 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.) Kevin R. Brennan, authorized representative of member				

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.

LBV Property Associates LLC If unavailable, the alternate to be used in the state of Florida is:		
2. The nai	me and the Florida street addre	ess of the registered agent and office are:
	NRAI Services	, Inc.
		(Name)
	515 East Par	< Avenue
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee	_{FL} 32301
		City/State/Zip
liability co agent and relating to	mpany at the place designated agree to act in this capacity. I the proper and complete perfor	nd to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as registered further agree to comply with the provisions of all statutes mance of my duties, and I am familiar with and accept the gent as provided for in Chapter 608, Florida Statutes.

by: William L. DeNapoli, Assistant Secretary

(Signature) V

\$ 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 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LBV PROPERTY ASSOCIATES 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 THIRD DAY OF NOVEMBER, A.D. 2011.

5060428 8300



AUTHENTICATION: 9134059

DATE: 11-03-11