

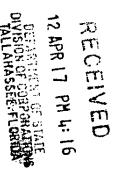
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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(December 1)		
(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		
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ACCOUNT NO. : I2000000195

REFERENCE: 171453 4302355

AUTHORIZATION

COST LIMIT

ORDER DATE: April 17, 2012

ORDER TIME : 3:29 PM

ORDER NO. : 171453-025

CUSTOMER NO: 4302355

FOREIGN FILINGS

NAME: G&I VII 1801 MASSARO LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. G&I VII 1801 MASSARO 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 consent of the managers or managing members adopting the alternate name. The alternate name must Company," "L.L.C," "LLC.")	and attach a copy of the writte tinclude "Limited Liability
2. Delaware 3. Applied for	
(Jurisdiction under the law of which foreign limited liability (FEI number, if approximately company is organized)	plicable)
4 04/13/2012 5 Perpetual	
(Date of Organization) (Duration: Year limited liability exist or "perpetual")	company will cease to
6. Upon qualification	
(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 DRA Advisors LLC	
220 East 42nd Street, 27th Floor, New York NY 10017	
(Street Address of Principal Office)	उस क
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	e as follows:
G&I Intermediate Ranger III LLC	
c/o DRA Advisors LLC	* S
220 East 42nd Street, 27th Floor, New York NY 10017	22.7
220 Last 4211d Street, 27th Floor, New York NY 10017	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offici the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in	al having custody of records 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: Real Es	state
	- •
Signature of a member or an authorized representative of a mer	nber.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirm penalties of perjury that the facts stated herein are true. I am aware that any false information	nation under the
document to the Department of State constitutes a third degree felony as provided for <u>bavid Lus Ki</u> , Authorized person of G&I Intermediate Range III LLC, its	•

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 Liabilit	y Company is:
G&I VII 1801 MASSARO LLC	
If unavailable, the alternate to be us	ed in the state of Florida is:
2. The name and the Florida street a	address of the registered agent and office are:
Corporation Service	: Company
*	(Name)
1201 Hays Street	
Florida S	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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Corporation Service Company

By: Stephanie Mulnee Stephanie K. Milnes	
Assistant Vice President	

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

Delaware

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The First State

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

DELAWARE, DO HEREBY CERTIFY "G&I VII 1801 MASSARO 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 SEVENTEENTH DAY OF APRIL, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "G&I VII 1801 MASSARO LLC" WAS FORMED ON THE THIRTEENTH DAY OF APRIL, A.D. 2012.

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

5139493 8300

120438343

Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 9508365

DATE: 04-17-12

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