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	Division of Corporations Fax Number : (850)617-638	I ICOC ICIAN CIRNER I
From:	Account Name : C T CORPORAT Account Number : FCA000000023 Phone : (850)222-109 Fax Number : (850)878-536	TON SYSTEM date of submission of
**Enter the emai annual repo Email Addre	l address for this business entort mailings. Enter only one em	ity to be used for future

Foreign Limited Liability Company SHP IV HARBOUR ISLAND, LLC

Certificate of Status	0
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Page Count	. 06
Estimated Charge	\$125.00

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EXAMINER

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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	T: SHP IV Harbour Island, LLC		
		ne of Limited Liability Company	
The anole	osed "Application by Foreign Limited Liab ,, and check are submitted to register the al	ility Company for Authorization to Transact Business in Florida," nove referenced foreign limited liability company to transact busin	Certificate of less in Florida.
Please ret	turn all correspondence concerning this ma	itter to the following:	
	Jan R. Ezell, Corporate Paralegal		
		Name of Person	
	Alston & Bird LLP		
		Firm/Company	
	1201 West Peachtree Street	· .	
		Address	
	Atlanta, GA 30309-3424		
	(City/State and Zip Code	
	stacee.smith@prudential.com		
	E-mail address: (t	o be used for future annual report notification)	73
For furthe	er information concerning this matter, please	se call:	Z
J	an R. Ezeil	at (404) 881-7442	-
-	Name of Person	Area Code & Daytime Telephone Number	9
	MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations		Division of Corporations	
	Registration Section P.O. Box 6327	Registration Section Religion Soliton Building	6∕1
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
	d is a check for the following amou \$125,00 Filing Fee \$130.00 Filing Pe Certificate of State	e & S155.00 Filing For & S160.00 Filing For, Certificat	te

F3_057 - 10/03/2010 C T System Coline

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:

	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	•	
CO	name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attach a copy of the unsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil impany," "L.L.C," "LLC.")	written ity	
7	Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 80-0811805 (PEI number, if applicable)	-	
4.	(Date of Organization) S. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	•	
6.	upon registration (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penelty liability)	•	
7.	PRBI Law Department, 7 Giraida Farms, Madison, NJ 07940	72	
D	(Street Address of Principal Office)	MAY	
	The name and usual business addresses of the managing members or managers are as follows!	3 15	
	SHP IV Plorida, LLC, PREI Law Department, 7 Giralda Parms, Madison, NJ 07940	F 2	C
the	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody office jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fixeign language, a relation of the certificate under eath of the translator must be submitted.)	cords in	
	. Nature of business or purposes to be conducted or promoted in Florida:		
	real estate investment	,	
	Signature of a member or an authorized representative of a member. (in accordance with section 608.408(3), F.9., the execution of this document constitutes an affirmation under the population 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 follony as provided for in s.817,155, F.S.) John W. Dark (see attached)		
	Typed or printed name of signee		

FL057 - 10/13/2010 CT Eyeleen Collect

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	ne Limited Liability Company is:			
SHP IV Harbour Is	ind, LLC			
If unavailable, th	e alternate to be used in the state of Florida is:		•	
2. The name and	the Florida street address of the registered agent a		12 **	
C	T Corporation System	HA	₹ 7	7
-	(Name)	ASSE		-
. 1	00 South Pine Island Road	က္သည္။	E M	1
	Florida Street Address (P.O. Box NOT ACCEPT	≈ 4 d		,
	fantation FL 33324	A	Ð	
•	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.

By: Connie Bryan

Connie Bryan

Connie Bryan

Signature) Assistant Secretary

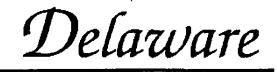
\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

17.057 - 10/05/2010 CT System Online

ATTACHMENT TO APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA FOR SHP IV HARBOUR ISLAND, LLC

SHP I	V HAR	BOOK I	SLAND	, LLC		i,
Ву:	SHP 1	V Florid	ia, LLC,	, a Doley	ware limited liability company, its sole member	
	By:	SHP 1	V, L.L.(C., a Del	laware limited liability company, its sole member	
		Ву:	Senio memb		ng Partnership Fund IV, L.P., a Delaware limited partnership, its	
			Ву:		or Housing Partnership Fund IV, L.L.C., a Delaware limited liability any, its general partner	
				Ву:	Prudential Investment Management, Inc., a New Jersey corporation, its managing member	
					By: /s/ John W. Dark Name: John W. Dark Title: Vice President	
		By:	Senio	r Housir	ng Partners IV, L.P., a Delaware limited partnership, its marker	1
			Ву:		r Housing Partners IV, L.L.C., a Delaware limited liability any, its general partner	
				ву:	Prudential Investment Management, Inc., a New Jersey corporation, its managing member	
					By: /s/ John W. Dark	
					Name: John W. Dark	
					Title: Vice President	

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SHP IV HARBOUR ISLAND, 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 SECOND DAY OF MAY, A.D. 2012.

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

5054323 8300

120499915

You may verify this certificate coline

AUTHENTY CATION: 9544589

DATE: 05-02-12

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