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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Adcount Number : FCA000000023 Phone : (850)222-1092 : (850)878-5368 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company STOCKBRIDGE AVENTURA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
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6/22/2012

CT CORPORATION

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COVER LETTER

TO: Registration Section Division of Corporati		
SUBJECT: Stockbridg	ge Aventura, LLC	
300000011	Name of Limited Liability Company	
Existence, and check are subm	Foreign Limited Liability Company for Authorization to Transact Business in Florida," C nitted to register the above referenced foreign limited liability company to transact businessee concerning this matter to the following:	
_	- ·	
Brian T. F		
	Name of Person	
McKenna	Long & Aldridge LLP	12 JUN 22 AM & 19
***************************************	Firm/Company	<u>ئ</u> ہے
202 Flace	Share Street Suite 5200	12 JUN 22
303 Peac	Chtree Street, Suite 5300	72
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Atlanta, G	A 30308	92
	City/State and Zip Code	7520 S
hhalmas/	Omekannalana aem	و ه
บานแบลรูดู	@mckennalong.com 8-mail address; (to be used for future annual report sotification)	
or further information concern	sing this matter please calls	
or implicit the intermeted competiti	mg tus matter, brease tur.	
Carol McEwen	_{at (} 404) 527-4666	
	e of Person Area Code & Daytime Telephone Number	
MAILING ADDRESS Division of Corporation		
Registration Section	ns Division of Corporations Registration Section	
P.O. Box 6327	Clifton Building	
Tallahassee, PL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
nclosed is a check for the	following amount:	
	S130.00 Piling Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate Cortificate of Status & Certified Copy	
	•	

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

IN COMPLIANCE WITH SECTION 602.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Stockbridge Aventura, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LY.C.," or "LY.C.") (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, Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4, 6/18/2012 5, perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. n/a (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 4 Embarcadero Ctr 33rd Floor, San Francisco, CA 94111 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows: Smart Markets Fund Holdings, LLC 4 Embarcadero Ctr 33rd Floor, San Francisco, CA 94111 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 larguage, a translation of the certificate under cath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: real estate ownership and leasing

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), P.S., the execution of this document constitutes an affirmation under the penalties 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 follows as provided for in s.817.155, F.S.)

ANITY NEW MAY - VIEW PRESIDENT

Typed or printed name of signee

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SECRETARY OF STATE

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.

	· · · ·
n the state of Florida is:	
ess of the registered agent and office are:	
em (Name)	12 J
sland Road Address (P.O. Box NOT ACCEPTABLE)	JUN 22
_{FL} 33324	
- ·	the state of Florida is: cess of the registered agent and office are: (Name) [And Road Address (P.O. Box NOT ACCEPTABLE)

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.

(Signature)
Danny Verdecchia, Jr. Asst. Secretary

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

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "STOCKBRIDGE AVENTURA, 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 EIGHTEENTH DAY OF JUNE, A.D. 2012.

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

5171587 8300

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

AUTHENTY CATION: 9651926

DATE: 06-18-12

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