# M1200004508

(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:				
'AUG 1 4 2012 L. SELLERS				

Office Use Only



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DEPARTMENT OF STATE
12 NUE 13 AH 10: 56

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SECRETARY OF STATE
ALL AHASSEF FLORID.



ON SERVICE COMPANY.				
ACCOUNT NO. : 12000000195				
REFERENCE : 309972 7578386				
AUTHORIZATION: Spelbellena.				
COST LIMIT : \$ 125.00				
ORDER DATE : August 10, 2012				
ORDER TIME : 10:32 AM				
ORDER NO. : 309972-005				
CUSTOMER NO: 7578386				
FOREIGN FILINGS				
NAME: LEX PALM BEACH GP 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: Becky Peirce EXT# 2919				
EXAMINER:				

#### COVER LETTER

TO:		on Section of Corporations		
SUВЛ	ECT: Lex	Palm Beach GP LLC		
•		•	Name of Limited Liability Company	
			Liability Company for Authorization to Transact Business in Florida," Certificate of eabove referenced foreign limited liability company to transact business in Florida	
Please	return all co	rrespondence concerning this	matter to the following:	
	λ	Aaria Hall		
			Name of Person	
	L	exington Realty Trust		
			Firm/Company	
	<u>C</u>	one Penn Plaza, Suite 401		
			Address	
	N	lew York, NY 10119-401	15	
	·—·		City/State and Zip Code	
	m	hall@lxp.com		
		E-mail address	: (to be used for future annual report notification)	
For furt	ther informa	tion concerning this matter, p	lease call:	
	Maria Ha		at (212 ) 692-7263	
		Name of Person	Area Code & Daytime Telephone Number	
	Division o Registration P.O. Box 6		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	sed is a che ]\$125.00 Fi	eck for the following ame ling Fee \$\int_\$130.00 Filing Certificate of \$	Fee & \$\infty\$\$\$155.00 Filing Fee & \$\infty\$\$\$\$\$\$ \$\infty\$\$\$\$\$ \$\infty\$\$\$\$\$\$\$\$\$\$ \$\infty\$	

### 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 LIBIT BY COMPLANY TO TRANSLOCT BY SINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	STATE OF FLORIDA:
Lex Palm Beach GP LLC	
(Name of Foreign Limited Liability Company; must inclu	de "Limited Liability Company," "L.L.C.," or "LLC.")
	t.
	se of transacting business in Florida and attach a copy of the written
consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	rnate name. The alternate name must include "Limited Liability
2. Delaware  (Jurisdiction under the law of which foreign limited liability	(FEI number, if applicable)
(Jurisdiction under the law of which foreign limited hability company is organized)	(FEI number, it applicable)
4. 08/08/12	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6,	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	to determine penalty liability)
7. c/o Lexington Realty Advisors, Inc.; One Penn Plaz	a, Suite 4015
New York, NY 10119-4015	
(Street Address of	of Principal Office)
3. If limited liability company is a manager-managed	company, check here 🛛
9. The name and usual business addresses of the mana	ging members or managers are as follows:
LRA Manager Corp.	
c/o Lexington Realty Advisors, Inc.; One Penn Pla	za, Suite 4015
New York, NY 10119-4015	<u> </u>
0. Attached in an autoinal cartificate of existence no man than 90 d	ays old, duly authenticated by the official having custody officeords in
he jurisdiction under the law of which it is organized. (A photocopy	
ranslation of the certificate under oath of the translator must be subm	
1. Nature of business or purposes to be conducted or	
limited partnership	F.S. W
A A CONTRACTOR OF THE PROPERTY	<del></del>
Magall	DE 6
•	horized representative of a member.
penalties of perjury that the facts stated herein are true	tion of this document constitutes an affirmation under the  Lam aware that any false information submitted in a
Making Main Main Main Main Main Main Main Main	a third degree felony as provided for in s.817.155, F.S.)
Typed or printed	name of signer
Typed or printed	name or 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.

If unavailable, the alternate to be used in the state of Florida is:				
registered agent and office are:				
lame)				
O. Box NOT ACCEPTABLE)				
FL 32301				
ty/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 Corporary

By: Milly Pluse, ASST VICE PREST DENT

\$ 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 "LEX PALM BEACH GP 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 AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEX PALM"
BEACH GP LLC" WAS FORMED ON THE EIGHTH DAY OF AUGUST, A.D. 2012.

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

5195846 8300

120926957

AUTHENTY CATION: 9773744

DATE: 08-10-12

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