

Division of Corporations Electronic Filing Cover Sheet

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To:

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Division of Corporations

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L. SELLERS

**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 MCRT MIRAMAR TOWN CENTER LLC

Certificate of Status Certified Copy 0 Page Count 05 Estimated Charge \$125.00

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Corporate Filing Menu

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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | | | |
|-------------|--|--|--|--|--|--|--|--|
| SUBJE | CT: MCRT Miramar Town Center LLC | | | | | | | |
| | 7 | lame of Limited Liability Company | | | | | | |
| | | lability Company for Authorization to Transact Business in Florida," Certificate above referenced foreign limited liability company to transact business in Flor | | | | | | |
| Please re | eturn all correspondence concerning this | matter to the following: | | | | | | |
| | Charlotte E. Wolveston, Parsleg | | | | | | | |
| | | Name of Person | | | | | | |
| | Jones Day | | | | | | | |
| | Firm/Company | | | | | | | |
| | 2727 N. Harwood Street | | | | | | | |
| | Address | | | | | | | |
| | Dallas, Texas 75201-1515 | | | | | | | |
| | City/State and Zip Code | | | | | | | |
| | rpurcell@mertrust.com | | | | | | | |
| | E-mail address: | (to be used for future annual report notification) | | | | | | |
| For furth | er information concerning this matter, pla | ease cail; | | | | | | |
| (| Charlotte E. Wolverton, Paralegal | at (²¹⁴) 969-4567 | | | | | | |
| | Name of Person | Area Code & Daytime Telephone Number | | | | | | |
|]]] | MAYLING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314 | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | | | | |
| | d is a check for the following amo \$125.00 Filing Fee \$130.00 Filing F Certificate of St | et & [78155.00 Filing Fee & [78160.00 Filing Fee, Certificate | | | | | | |

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PAGE 02/05

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 LIBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. | MCRT Miramar Town Center LLC | |
|----|---|-------------------|
| | (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") | |
| Ċ٥ | f name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attach a copy of the writtensent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "[L.C," "LLC.") | eri |
| 2 | Delaware 3, 90-0881186 | |
| , | (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) | |
| 4. | August 20, 2012 5. Perpetual | |
| ٠, | (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") | |
| б. | Upon Qualification | |
| | (Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to detarmine penalty liability) | |
| 7. | 2255 Glades Rosd, Suite 423A, Boca Raton, Florida 33431 | |
| | (Street Address of Principal Office) | |
| _ | ` <u> </u> | |
| 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: | |
| | MCRT South Florida LLC, 2255 Glades Road, Suite 423A, Boca Raton, Florida 33431 | |
| | | |
| | | |
| | | |
| חו | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in | |
| | purisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fibring testing a | |
| | station of the certificate under onth of the translator must be submitted.) | |
| 1. | . Nature of business or purposes to be conducted or promoted in Florida: Development and management | |
| | of multifamily residential real estate. | ر. ديوريس |
| | harlul lunceel | THE WILL SE |
| | Signature of a member or an authorized representative of a member. | |
| | from any many and applied (a) the mind december of this absented to be applied to a tribution in the contract of the applied to the applied to the contract of the applied to the applied | - |
| | document to the Department of State completions of the day false information submitted in a document to the Department of State completions of the day of | Value of the last |
| | MCRT South Florida LLC, Sole Member, by Rachel Purcell, Secretary | |
| | Tuned by printed pages of plants | |

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 Liability Company is:

| MCRT Miramar Town Center LLC | | | | | | | |
|---|---|--|--|---|--|--|--|
| If unavailable, the alternate to be used in the state of Florida is: N/A | | | | | | | |
| 2. The nam | e and the Florida street | address of th | he registered agent and of | fice are: | | | |
| | C T Corporation System | | | | | | |
| • | - | — — — | (Name) | | | | |
| | 1200 South Pine Island Road | | | | | | |
| | Florida : | Mroet Address | (P.O. Box NOT ACCEPTABLE) |) | | | |
| | Plantation | | FL 33324 City/State/Zip | | | | |
| | | · | ony out to sup | | | | |
| liability comp agent and ag relating to th | pany at the place design ree to act in this capacit e proper and complete p my position as register C P Comparati | ated in this ca y. I further a performance of ed agent as p on System (Signature) | igree to comply with the proof my duties, and I am fam. Provided for in Chapter 60. | the appointment as registered rovisions of all statutes lliar with and accept the | | | |
| | \$ | 25.00 De 30.00 Ce | ing Fee for Application signation of Registered A rtified Copy (optional) rtificate of Status (option | • | | | |

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SIT_ IABING APPELATE PARE

Delaware

DAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MCRT MIRAMAR TOWN CENTER 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 TWENTY-FOURTH DAY OF AUGUST, A.D.
2012.

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

5200920 8300

120969728

You may verify this cartificate online at corp. delaware. gov/authver. shiml

AUTHENTICATION: 9803465

DATE: 08-24-12

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