# 1200006205

| (Re                                     | equestor's Name)   |             |  |  |
|---|--------------------|-------------|--|--|
| (Ac                                     | idress)            |             |  |  |
| (Ac                                     | ldress)            | <del></del> |  |  |
| (Ci                                     | ty/State/Zip/Phon  | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL        |  |  |
| (Bu                                     | usiness Entity Nar | me)         |  |  |
| (Document Number)                       |                    |             |  |  |
| Certified Copies                        | _ Certificates     | s of Status |  |  |
| Special Instructions to Filing Officer: |                    |             |  |  |
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Office Use Only



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| UN SERVICE CUMPANT  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| ACCOUNT NO. : 12000000195   |  |  |  |  |  |  |
| REFERENCE : 408863 4348715  |  |  |  |  |  |  |
| AUTHORIZATION : CIPELS RELEASED                                     |  |  |  |  |  |  |
| COST LIMIT : \$ 12500   |  |  |  |  |  |  |
| ORDER DATE: November 2, 2012  |  |  |  |  |  |  |
| ORDER TIME : 3:24 PM  |  |  |  |  |  |  |
| ORDER NO. : 408863-015  |  |  |  |  |  |  |
| CUSTOMER NO: 4348715  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| FOREIGN FILINGS   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| NAME: QUORUM CENTER MANAGING MEMBER<br>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: Susie Knight EXT# 52956                             |  |  |  |  |  |  |
| EXAMINER:   |  |  |  |  |  |  |

#### COVER LETTER

| TO:                     | Registration Section Division of Corporations  |   |   |   |
|-------------------------|--|---|---|---|
| SUBJE                   | CT: Quorum Center Managing Men   | iber LLC  | •   |   |
|                         |  | ne of Limited Liability Comp  | pany  |   |
|                         | closed "Application by Foreign Limited Liab<br>ce, and check are submitted to register the al  |   |   |   |
| Please                  | return all correspondence concerning this ma   | uter to the following:  |   |   |
|                         |  | Wayne M. Lopkin   |   |   |
|                         |  | Name of Person  |   |   |
|                         | · γ  | Vayne M. Lopkin LLC   |   |   |
|                         | Firm/Company   |   |   |   |
|                         | Suite 10   | 007 52 Vanderbilt Aven  | ue  |   |
| Address                 |  |   |   |   |
| New York, NY 10017      |  |   |   |   |
| City/State and Zip Code |  |   |   |   |
|                         | ckingston@praediumgroup.c  |   |   |   |
|                         | ·  | o be used for future annual re  | eport notification)   |   |
| For furt                | ner information concerning this matter, pleas  | se call:  |   |   |
|                         | Wayne M. Lopkin  | at (212   | 687-2900  |   |
|                         | Name of Person   | Area Code & Daytime T   | Celephone Number  |   |
|                         | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314   | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301 | ile   |   |
|                         | ed is a check for the following amour<br>\$125.00 Filing Fee \$\int_\$ | & []\$155.00 Filing Fee   | & []\$160.00 Filing Fee, Certificat<br>of Status & Certified Copy | e |

### 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:

| 1. Quorum Center Managing Member LLC   |  |  |
|--|--|--|
| (Name of Foreign Limited Liability Company; must in  | clude "Limited Liability Company," "L.L.C.," o   | r "LLC.")                                    |
|  |  |  |
| (If name unavailable, enter alternate name adopted for the pur<br>consent of the managers or managing members adopting the a | pose of transacting business in Florida and attac  | n a copy of the writte<br>'Limited Liability |
| Company," "L.L.C," "LLC.")   | incipate name. The attenue name must herute  | Emacod Emaining                              |
| •  | 2  |  |
| <ol> <li>Delaware         (Jurisdiction under the law of which foreign limited liability</li> </ol>                          | y (FEI number, if applicable)  |  |
| company is organized)  | , , ,  |  |
| 4. 11/02/2012  | 5. perpetual   |  |
| (Date of Organization)   | (Duration: Year limited liability company exist or "perpetual")                                | will cease to                                |
| 6.   |  | <b>3</b>                                     |
| (Date first transacted business in )   | Florida, if prior to registration.)  | 12 NOV -5                                    |
| (See sections 608.501 & 608.502 F  | ,  |  |
| 7. c/o The Praedium Group LLC, 825 Third Avenue  | e, 36th Floor, New York, NY 10022  | \$   |
|  |  |  |
| (Street Addre  | ess of Principal Office)   | <u> </u>                                     |
|  |  | $\approx$ $\sim$                             |
| <ol><li>If limited liability company is a manager-manage</li></ol>   | ed company, check here []  | IDA<br>DA                                    |
| 9. The name and usual business addresses of the ma   | anaging members or managers are as foll  | ows:   |
|  |  |  |
| P 7 Quorum Center LLC, c/o The Praedium Gro  | oup LLC, 823 Trita Avenue, 36th Floor  | <del></del>                                  |
| New York, NY 10022   |  |  |
| 11011 2011,111 2002  |  | <del></del>                                  |
|  |  |  |
| 10. Attached is an original certificate of existence, no more than 9   | O down ald duly a althousticasted by the official baris  | a criotach caf naoirik in                    |
| the jurisdiction under the law of which it is organized. (A photoco  |  |  |
| translation of the certificate under oath of the translator must be su   |  | , 00,  |
| 11. Nature of business or purposes to be conducted   | or promoted in Florida:  |  |
|  |  |  |
| Direct or indirect real estate investment  | · · · · · · · · · · · · · · · · · · ·  | ·  |
| Nane   | M. In  |  |
| ~ 11   | authorized representative of a member, recution of this document constitutes an affirmation of | oder the                                     |
|  | true. I am aware than any false information subm   |  |
| document to the Department of State constitu   | ites a third degree felony as provided for in s.817  |  |
| Wayne M. Lopkin  |  |  |

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 Liability Company is:                                   |                           |
|--|---------------------------|
| Quorum Center Managing Member LLC  |                           |
| If unavailable, the alternate to be used in the state of Florida is:               |                           |
| 2. The name and the Florida street address of the registered agent and office are: | 12 NOV                    |
| Corporation Service Company  | 三型 三丁                     |
| (Name)   | 一部。一                      |
| 1201 Hays Street   | ED<br>SEEL PL             |
| Florida Street Address (P.O. Box NOT ACCEPTABLE)                                   | 9: 39<br>STATE<br>FLORIDI |
| Tallahassee FI 32301   | X-P                       |
| 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

Sue G. Knight

Assistant Vice President
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "QUORUM CENTER MANAGING MEMBER 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 NOVEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "QUORUM CENTER MANAGING MEMBER LLC" WAS FORMED ON THE SECOND DAY OF NOVEMBER, A.D. 2012.

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

5236235 8300

121190098

AUTHENTY CATION: 9959223

DATE: 11-02-12

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