(Requestor's Name)	<u>.</u>
(Address)	
(Address)	
(City/State/Zip/Phone	#)
PICK-UP WAIT	MAIL.
(Business Entity Name	e)
(Document Number)	
Certified Copies Certificates of	of Status
Special Instructions to Filing Officer:	

Office Use Only

G. MCLEOD

NOV 2 9 2012

EXAMINER



800240208958



ACCOUNT NO. : 12000000195
REFERENCE : 434694 4983A
AUTHORIZATION: Spubblena
COST LIMIT : (\$1.25.00
ORDER DATE: November 27, 2012
ORDER TIME : 9:37 AM
ORDER NO. : 434694-085
CUSTOMER NO: 4983A
FOREIGN FILINGS
NAME: BRAMAN-LEIBOWITZ TEMPLE LOTS, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u> )
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX PLAIN STAMPED COPY
CONTACT PERSON: Kimberly Moret EXT# 52949

EXAMINER:

## 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 RESIDENCE IN THE STATE OF FLORIDA:

THAILTED PADITILL CONNENTAL TO TRANSACT DOSTAGES IN LE	IE SIAIE OF FIJORIDA.	
Braman-Leibowitz Temple Lots, LLC		
1. Braman-Leibowitz Temple Lots, LLC (Name of Foreign Limited Liability Company; must inc	clude "Limited Liability Company," "L.L.C.,	or "LLC.")
(If name unavailable, enter alternate name adopted for the purp	nace of transacting business in Florida and at	tach a conv of the written
consent of the managers or managing members adopting the al		
Company," "L.L.C," "LLC.")		
2. Delaware	3. (FEI number, if applicable	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable	e)
4. November 7, 2012	5. Perpetual	
(Date of Organization)	(Duration: Year limited liability compa exist or "perpetual")	any will cease to
N/A	, , , , , , , , , , , , , , , , , , ,	25.
6. N/A		
(Date first transacted business in F (See sections 608.501 & 608.502 F.	'lorida, if prior to registration.) S. to determine penalty liability)	ANA TO
	,	
7. 2060 Biscayne Boulevard, Second Floor		SS 5
) (' ' ' 'Y)		[17]*** /
Miami, FL 33137	1005	
(Street Addres	ss of Principal Office)	SIAI SIAI
8. If limited liability company is a manager-manage	d sammany shook hara	RAT -
6. If fiffiled flability company is a manager-manage	d company, check here [2]	- 10
9. The name and usual business addresses of the ma	anaging members or managers are as f	allawe:
7. The name and usual business addresses of the ma	maging members of managers are as i	onows.
Braman-Leibowitz Florida Real Estate Associate	es, LLC	
2060 Biscayne Boulevard, Second Floor, Miami	, FL 33137	
10. Attached is an original certificate of existence, no more than 90	Odays old, duly authenticated by the official har	ving custody of records in
the jurisdiction under the law of which it is organized. (A photoco	ppy is not acceptable. If the certificate is in a for	eign language, a
translation of the certificate under eath of the translator must be sul	bmitted.)	,
11. Nature of business or purposes to be conducted of	or promoted in Florida:	
To own, hold and manage commercial real estate	•	<del></del>
	<u> </u>	<del></del> '
Please see I	Exhibit A attached	
Signature of a member or an a	uthorized representative of a member	•
(In accordance with section 608.408(3), F.S., the exe	ecution of this document constitutes an affirmation	n under the
penalties of perjury that the facts stated herein are t		
document to the Department of State constitut		17.155, F.S.)
Please see	Exhibit A attached	
Typed or printe	ed 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	of the Limited Liability Company is:
Braman-Leibo	owitz Temple Lots, LLC
If unavailable,	the alternate to be used in the state of Florida is:
2. The name a	nd the Florida street address of the registered agent and office are:
	Corporation Service Company
	(Name)
	1201 Hays Street
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301
	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

Ximberty B. Moret as its agent

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

#### **EXHIBIT A**

BRAMAN-LEIBOWITZ FLORIDA REAL ESTATE ASSOCIATES, LLC, the Sole Member

Fourth Amended and Restated Declaration of Trust of Norman Braman dated May 31, 2002

By:

Norman Braman, Trustee

Edward R. Leibowitz Revocable Trust Agreement of 2004

Edward R. Leibowitz\Trustee

Blossom M. Leibowitz Revocable Trust Agreement of 2004

Blossom M. Leibowitz, Trustee

# Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "BRAMAN-LEIBOWITZ TEMPLE LOTS, 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-SEVENTH DAY OF NOVEMBER, A.D.

2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID

"BRAMAN-LEIBOWITZ TEMPLE LOTS, LLC" WAS FORMED ON THE SEVENTH

DAY OF NOVEMBER, A.D. 2012.

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

5238169 8300

121265585

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 0013408

DATE: 11-27-12

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