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To:

Division of Corporations

Fax Number

: (850)617-6383

MAR 2 9 2013

L. SELLERS

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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

Email Address:

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Foreign Limited Liability Company Paddock Mall SB, LLC

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COVER LETTER

	ration Section on of Corporations	•		
Pe	addock Mall SB, LLC	:		
PORIECT:		Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed "/ Existence, and o	Application by Poreig theck are submitted to	n Limited Liability Com register the above refer	pany for Authorization to Tri enced foreign limited liability	ansact Business in Florida," Certificate of y company to transact business in Florida
Please return all	correspondence con	cerning this matter to the	following:	
	Jaymie McDougal			
		Ne	une of Person	
	Simon Property Gr	oup		
		Fi	rm/Company	
	225 W. Washington	n St		
			Address	
	Indianapolis, IN 46	204		
		City/St	ate and Zip Code	
	jmcdougal@simon.	:om		
	E-	mail address; (to be used	for future annual report noti	fication)
For further infor	mation concerning th	is matter, please call:		
Jaymic	McDougal		317 685-73	71
	Nume of I		Code & Daytime Telephone	Number
Divisio Registi P.O. B	ING ADDRESS: on of Corporations ation Bection ox 6327 assee, FL 32314	Divisio Registr Clifton 2661 E	CT ADDRESS: n of Corporations ation Section Building xecutive Center Circle ssee, FL 32301	
	check for the foll			
□ \$ 12:	5.00 Filing Fee 🛚 🖸	\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Cartificate of Status & Certified Copy

PLOSS - 12/03/2017 Welters Kluwer Oalling

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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

consent of the	evailable, enter alternate name adopted for na managers or managing members adopti "L.L.C," "LLC.")				
Delaware		2			
(Jurisdicti company	on under the law of which foreign limited is organized)	I liability 3	(FEI number, if applicable	e)	
March 2	0, 2013	_ 5.	Perperual		
4.	(Date of Organization)	_	(Duration: Year limited liability compexist or "perpetual")	any will cease to	
6	Date first transacted bus	iness in Florida	if prior to registration		
	(See sections 608.501 & 60	08,502 F.S. to d	letermine penalty liability)		
7. Co Con	porate Paralegal, 225 W. Washington St.,	P.O. Box 7033,	Indianspolis, IN 46207-7033		
	(Stree	et Address of P	rincipal Office)		
8. If limit	ed liability company is a manager-	managed con	npany, check here		
9. The nat	. The name and usual business addresses of the managing members or managers are as follows:				
Simon	SB Franchise, LLC, 225 W. Washington 5	St., P.O. Box 70	033, Indianapolis, IN 46207-7033		

	l is an original certificate of existence, no ma	onethan 90 days	old, duly authenticated by the official h	aving a ready of rea	
10 Attached	an under the law of which it is organized. (
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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 L. Paddock Mail SB, LLC	imited Liability Compa	ny is:		
If unavailable, the alte	emate to be used in the	state of Florida is:		
2. The name and the	Florida street address of	f the registered agent and office are:		
	C T Corporation System			
1,00 - 0	(Name)			
	1200 South Pine Island Road			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Plant	ation .	FL 33324		
		City/State/Zip	•	
liability company at the registered agent and a statutes relating to the	e place designated in the gree to act in this capac proper and complete pa	o accept service of process for the above so is certificate, I hereby accept the appointm city. I further agree to comply with the pro erformance of my duties, and I am familia ered agent as provided for in Chapter 608	nent as ovisions of all r with and	
Signates.	C T Corporation System	Connie Bryan		
By: <u>/</u>	Cornie Bay	Assistant Secreto	Ÿ	
	\$ 100.90 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)		

FLQ57 - 12/03/2012 Webser Klower Calina

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELANARE, DO HEREBY CERTIFY "PADDOCK MALL SB, 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-SEVENTE DAY OF MARCH, A.D. 2013.

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

5306621 8300

130367362

You may varify this cartificate on!: at corp.delaware.gov/authvar.shtml

AUTHENTICATION: 0318074

DATE: 03-27-13