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| PICK-UP                 | WAIT                                   | MAIL        |
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| Certified Copies        | _ Certificates                         | s of Status |
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| Special Instructions to | Filing Officer:                        |             |
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Office Use Only



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T. HAMPTON



\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

|               | ACCOUNT NO.             | :          | 12000000   | 0195    |
|---------------|-------------------------|------------|------------|---------|
|               | REFERENCE               | :          | 662061     | 4385116 |
|               | AUTHORIZATION           | :          |            | 1.      |
|               | COST LIMIT              | :          | \$ 425000  | Cleran  |
| ORDER DATE :  | May 23, 2013            |            |            |         |
| ORDER TIME :  | 9:41 AM                 |            |            |         |
| ORDER NO. :   | 662061-095              |            |            |         |
| CUSTOMER NO:  | 4385116                 |            |            |         |
|               |                         |            |            |         |
|               | FOREIGN F               | ILII       | <u>IGS</u> |         |
|               |                         |            |            |         |
| NAME:         | FL-633 NORTH            | ORAI       | IGE AVENUI | 3,      |
| XXXX QUALIFIC | CATION (TYPE: <u>L.</u> | <u>L</u> ) |            |         |

EXAMINER:

| CR2E027 ( | 9/10 | ງງ |
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#### **COVER LETTER**

|             | Registration Section<br>Division of Corporations   |  |   | ,            |  |   |
|-------------|--|--|---|--------------|--|---|
| SUBJEC      | FL-633 North Oran  | ge Avenue, LLC   |   |              |  |   |
| SUBJEC      | . 1 2  | Name of Lin  | nited Liability Cor   | npany        |  |   |
|             |  |  |   |              | nsact Business in Florida," Certifica<br>company to transact business in Flo |   |
| Please ret  | turn all correspondence co   | oncerning this matter to the   | e following:  |              |  |   |
|             | Michael J. Halle   | eron   |   |              |  |   |
|             | ***  | N  | ame of Person   |              |  |   |
|             | Tribune Compa  | ny   |   |              |  |   |
|             | <del></del>  | Fi   | rm/Company  |              | · · · · · · · · · · · · · · · · · · ·  |   |
|             | 435 N. Michigar  | n Ave., Suite 600  |   |              |  |   |
|             |  |  | Address   |              |  |   |
|             | Chicago, IL 606  | 11   |   |              |  |   |
|             |  | City/S   | tate and Zip Code   |              |  |   |
|             | mhalleron@tribu  |  |   |              |  |   |
|             |  | E-mail address: (to be used  | l for future annual   | report notif | ication)   |   |
| For furthe  | er information concerning  | this matter, please call:  |   |              |  | • |
| !           | Michael Halleron   |  | 312<br>at (   | 222-57;<br>) |  |   |
|             | Name of  | f Person Area  | a Code & Daytime  | Telephone    | Number   |   |
| T<br>R<br>P | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314 | Divisio<br>Registr<br>Clifton<br>2661 E                                  | ET ADDRESS:<br>n of Corporations<br>ation Section<br>Building<br>xecutive Center Ci<br>ssee, FL 32301 | ircle        |  |   |
|             | d is a check for the fo<br>¶ \$125.00 Filing Fee   | llowing amount:  \$\square\$ \$130.00 Filing Fee & Certificate of Status | □ \$155.00 Filin<br>Certified Co  | _            | ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy                |   |

### 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. FL-633 North Orange Avenue, LLC  |   |
|---|---|
| (Name of Foreign Limited Liability Company; 1   | must include "Limited Liability Company," "L.L.C.," or "LLC.")  |
|   | the purpose of transacting business in Florida and attach a copy of the written<br>ig the alternate name. The alternate name must include "Limited Liability" |
| 2. Delaware   | 38-3894443  |
| (Jurisdiction under the law of which foreign limited l<br>company is organized)   | liability (FEI number, if applicable)   |
| 4. 12/03/2012   | 5. Perpetual  |
| (Date of Organization)  | (Duration: Year limited liability company will cease to exist or "perpetual")   |
| 6. 06/01/2013   |   |
| (Date first transacted busin  | tess in Florida, if prior to registration.)<br>8.502 F.S. to determine penalty liability)   |
| 7. 435 N. Michigan Ave.   | DIV   |
| Chicago, IL 60611   | Address of Principal Office)  |
| (Street   | Address of Principal Office)  |
| 3. If limited liability company is a manager-m  | nanaged company, check here   |
| ). The name and usual business addresses of t   | Address of Principal Office)  Panaged company, check here   the managing members or managers are as follows:  |
| Tribune Real Estate Holdings, LLC   | 7   |
| 435 N. Michigan Ave.  |   |
| Chicago, IL 60611   |   |
| he jurisdiction under the law of which it is organized. (A<br>ranslation of the certificate under oath of the translator mu | •   |
| property located at 633 North Orange Avenue,  | ucted or promoted in Florida: Holding company for the Orlando, FL 32801   |
| mel   | ·   |
| Signature of a member of  | or an authorized representative of a member.  |
| •   | the execution of this document constitutes an affirmation under the   |

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Patrick M. Shanahan, Asst. Treasurer of Tribune Real Estate Holdings, LLC

penalties of perjury that the facts stated herein are true, I am aware that any false information submitted in a

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  | f the Limited Liability Company is:                                   |
|-----------------|---|
| FL-633 North O  | range Avenue, LLC   |
| If unavailable, | the alternate to be used in the state of Florida is:                  |
| 2. The name ar  | 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

By: Oshley Sirfey Cast Freetay

(Signature)

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

SECRETARY OF STATE DIVISION OF CORPORATIONS

## Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "FL-633 NORTH ORANGE AVENUE, 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-THIRD DAY OF MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FL-633 NORTH ORANGE AVENUE, LLC" WAS FORMED ON THE THIRD DAY OF DECEMBER,

A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5251542 8300

130646593

AUTHENTY CATION: 0456928

DATE: 05-23-13

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