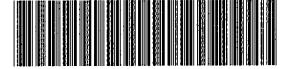
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Certified Copies	_ Certificates	s of Status
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Office Use Only



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July 7, 2014

CSC EMILY GRAY TALLAHASSEE, FL

SUBJECT: AH SUBGP 1470 PALMETTO, LLC

Ref. Number: W14000041490

RESUBMIT

Please give original submission date as file date.

We have received your document for AH SUBGP 1470 PALMETTO, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 214A00014498

RECEIVED

14 JUL -7 PH 1: 49

ILLOSION OF CORPORATION

2314 (ÚUL -3 AH 9× 23 SECRETARY OF STATE

www.sunbiz.org



ACCOUNT NO. : I2000000195

REFERENCE : 204387

7164167

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	7X		

COST LIMIT \$ 125.00

ORDER DATE : July 3, 2014

ORDER TIME : 3:17 PM

ORDER NO. : 204387-010

CUSTOMER NO: 7164167

FOREIGN FILINGS

NAME: AH SUBGP 1470 PALMETTO, 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: Emily Gray -- EXT# 62925

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AH SubGP 1470 Palmetto, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Vivian Munoz
Name of Person
AIG GRE - Affordable Housing
Firm/Company
777 S. Figueroa St., 16th Floor
Address
Los Angeles, CA 90017
City/State and Zip Code
vivian.munoz@aig.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
For further information concerning this matter, please call: Vivian Munoz 213 533-3752
Name of Contact Person at () Area Code Daytime Telephone Number \(\omega \)
Name of Contact Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET 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 Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: □ \$125.00 Filing Fee: □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certificate of Status □ \$155.00 Filing Fee & □ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. AH SubGP 1470 Palmetto, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.").
(If name unavailable) enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")
₂ Delaware
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. c/o AIG GRE - Affordable Housing
777 S. Figueroa St., 16th Floor, Los Angeles, CA 90017
(Street Address of Principal Office)
6. c/o AIG GRE - Affordable Housing
777 S. Figueroa St., 16th Floor, Los Angeles, CA 90017
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Douglas S. Tymins, Vice President of SAFG Retirement Services, Inc.
Stewart R. Polakov, Authorized Agent of SAFG Retirement Services, Inc.
777 S. Figueroa St., 16th Floor, Los Angeles, CA 90017
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Douglas S. Tymins
Typed of printed name of signed

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailab	ole, the alternate to be used in the	state of Florida is:	
2. The nam	é and the Florida street address of	f the registered agent and office a	are:
	Corporation Service Company		
			-, 1~
		(Name)	28 H
	1201 Hays Street		SECULIANA PRILLANA
	1201 Hays Street		
	1201 Hays Street	(Name)	1

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 605, Florida Statutes.

By: Company

(Signature)

Asst VP

\$ 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 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "AH SUBGP 1470 PALMETTO, 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 THIRD DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AH SUBGP 1470 PALMETTO, LLC" WAS FORMED ON THE FIRST DAY OF JULY, A.D. 2014.

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

5561741 8300

140919032

AUTHENTY CATION: 1509585

DATE: 07-03-14

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