4/10/2015 13:37:20 From: To: 8506176383 000002589

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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#### Foreign Limited Liability Company Town Center Owner LLC

Certificate of Status	0
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#### COVER LETTER

TOi	Registration Section Division of Corporations				
SUBJE	CT: Town Center Owner	rrc			
		Name of Limit	od Liability Company		
				to Transact Business in Florida," ability company to transact busin	
Picaso r	eturn all correspondence con	cerning this matter to the	e following:		
	Jigi Parikh-Slio				
		N	fame of Person		
	Fried, Frank, Han	is, Shriver & Jacobso	n LLP		
		F	Inn/Company		
	One New York Pl	eze			
			Address		
	New York, NY 10				
		City/s	State and Zip Code		
	Jigi.Parikh-Silo@fi	riedfrank.com			
		E-mail address: (to be use	d for future minual report	notification)	
For furth	er information concerning th	ls matter, please call:			
	Jigi Parikh-Silo		et (212 ) 8:	59-895O .	
		ontact Person	Area Code	Daytime Telephone Number	
	MAILING ADDRESS:		ET ADDRESS:		
	Division of Corporations		on of Corporations		
	Registration Section P.O. Box 6327	_	ation Section Building		
	Tallahassee, FL 32314		xecutive Center Circle		
•	1 a (1811) 235 CC, FC 32314	–	19500, FL 32301		
Enclos	ed is a check for the foll		MAISSAA DIN D.	. A	i-Carlo
	□ \$125.00 Filing Fee □	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fed Certified Copy	of Signus & Certified (	

# 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:

1. Town Center Own	per LLC		
(Name of Fo	oreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.	(17)	
(If name unavailable, onto	er alternate name adopted for the purpose of transacting business in Florida. The alternate name mi C," or "U.C.")	ust include "Limited	l
2. Delaware	3. N/A		
(Jurisdiction under the company is organized)	law of which foreign limited liability (FEI number, if applicable)		
4.		35 60	
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	ŢŖ.	5 APR
5. c/o Goldman, Sac	chs & Co., Investment Management Division, 200 West Street, 35th Floor	<u> </u>	သည်
New York, New Y	'ork 10282	SSA	0
<del></del>	(Street Address of Principal Office)	[1] C	$\mathbb{R}$
6. do Goldman, Sad	hs & Co., Investment Management Division, 200 West Street, 35th Floor		
New York, New Y		TATA DRIG	85 m
	(Mailing Address)	>	
7. The name, title	or capacity and address of the person(s) who has/have authority to manage	s is/are;	
M. Patrick Carroll (Pr	esident), clo Carroll Organization, LLC, 3340 Peachtree Rd., Suite 1620, Atlanta	, GA 30326	
Joseph Champion(Vi	ice President),c/o Carroll Organization, LLC,3340 Peachtree Rd,Ste 1820, Atlant	ta, GA 30326	
Darren W. Devore (V	rice President),c/o Carroll Organization, LLC,3340 Peachtree Rd,Ste 1820, Alian	la, GA 3032(	
having custody of re	iginal certificate of existence, no more than 90 days old, duly authenticate ecords in the jurisdiction under the law of which it is organized. (A photocritificate is in a foreign language, a translation of the certificate under oath	copy is not	
	fs/ Jigl Parikh-Silo		
(In accordance with section 6) am aware that any fillse infort	Signature of an authorized person  05.0203, F.S., the execution of this document contributes an affirmation under the penalties of perjury that the metion submitted in a document to the Department of State constitutes a faird degree fellowy as provided for in	(sets stated herein an s 817.155, F.S.)	turus i
	Jigi Parikh-Silo		
	Typed or printed name of signee		

## 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.

Town Center (	JANIO CLO		270		
If unavailable, the alternate to be used in the state of Plorida is:				5 APR	27 5 2 vs.
2. The name and the Florida street address of the registered agent and office are:		OST. COST. COST. COST.	IO PM		
	C T Corporation System		10 10 10 10 10 10 10 10 10 10 10 10 10 1	₩.	e e e e e e e e e e e e e e e e e e e
		(Name)	STATE LORIDA	28	T. 6.2
	1200 South Pine Island	Road	•		
_	Florida S	irret Address (P.O. Box NOT ACCEPTABLE)			
	Plantation	FL 33324			
		Clty/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 605, Florida Statutes.

S 100.00 Filing Fee for Application

S 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 "TOWN CENTER OWNER 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 TENTH DAY OF APRIL, A.D. 2015.

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

15 APR 10 PH II: 58

5708647 8300

150495226

You may verify this certificate online at corp. delewere.gov/suthver.shtml

Jeffrey W. Bullock, Secretary of State

DATE: 04-10-15