Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 (850) 205-8842 Phone 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:

2016 HAR 18

## Foreign Limited Liability Company **Broadstone City Center, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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Electronic Filing Menu Corporate Filing Menu S. YOUN

TO: Registration Section Division of Corporations  SUBJECT: Broadstone City Center, LLC  Name of Limited Liability Company  The enclosed "Application by Poreign Limited Liability Company for Authorization to Transact Business in Florida," Ce Existence, and check are submitted to register the above referenced foreign limited liability company to transact business  Please return all correspondence concerning this matter to the following:  Joanna Contarino  Name of Person  Alliance Residential LLC  Firm/Company  2415 E. Camelback Rd., Ste 600  Address  Phoenix, AZ 85016  City/State and Zip Code akunkin@eidebailly.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Trina Armstrong  Name of Contact Person  MAILING ADDRESS:  STREET ADDRESS:			COVER LETTER	
Name of Limited Liability Company  The enclosed "Application by Poreign Limited Liability Company for Authorization to Transact Business in Florida," Ce Existence, and check are submitted to register the above referenced foreign limited liability company to transact business  Please return all correspondence concerning this matter to the following:  Joanna Contarino  Name of Person  Alliance Residential LLC  Firm/Company  2415 E. Carnelback Rd., Ste 600  Address  Phoenix, AZ 85016  City/State and Zlp Code  akunkin@eidebailly.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Trina Armstrong  Name of Contact Person  Name of Contact Person  Daytime Telephone Number	DIABIOU			
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Registration Section P.O. Box 6327  Registration Section Clifton Building	For further inform  Trina A  MAILII  Division  Registra	Name of Contact Person  NG ADDRESS: of Corporations ion Section	Area Code	Daytime Telephone Number  STREET ADDRESS: Division of Corporations Registration Section

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

☐ \$155.00 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

\$\Bigsim \\$125.00 \text{ Filing Fee} \quad \Bigsim \\$130.00 \text{ Filing Fee & Certificate of Status}

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Broadstone City Center, 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 (FEI number, if applicable) company is organized) 3/16/2016 (Date first transacted business in Florida, If prior to registration.)
(See acctions 605.0904 & 605.0905, F.S. to determine penalty liability) 2415 E. Camelback Rd., \$te 600 Phoenix, AZ 85016 (Street Address of Principal Office) 2415 E. Camelback Rd., Ste 600 Phoenix, AZ 85016 (Muiling Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System 1200 South Pine Island Road Office Address: Plantation \_\_\_\_\_, Plorida 33324 Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes returned to complywith the provisions of my position as registered agent.

C.T. Corporation System

Michael E. Jones to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who bas/have authority to manage is/are: SEE ATTACHED PAGE 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. I 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. V. Jay Hiemenz, Authorized Person

Typed or printed name of signes

## **EXHIBIT A to** Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida BROADSTONE CITY CENTER, LLC

ALL MEMBER NAMES	ADDRESSES
Broadstone City Center Alliance, LLC	2415 E. Camelback Road, Suite 600 Phoenix, Arizona 85016
AIGGRE City Center Investor, LLC	2415 E. Camelback Road, Suite 600 Phoenix, Arizona 85016

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "BROADSTONE CITY CENTER, 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 FOURTEENTH DAY OF MARCH, A.D. 2016.

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

SECRETARY OF STATE

5988777 8300 SR# 20161650317 Authentication: 201982503

Date: 03-14-16

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