M14000005103

(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAI	L				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 188057 4302216

AUTHORIZATION : Smellele

COST LIMIT : (\$' 125.00

ORDER DATE: June 21, 2016

ORDER TIME : 12:58 PM

ORDER NO. : 188057-010

CUSTOMER NO: 4302216

FOREIGN FILINGS

NAME: BRE PORTOFINO MF PROPERTY

OWNER 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: Melissa Zender -- EXT# 62956

EXAMINER:

لما الما

COVER LETTER

		tion Section of Corporation	s							
SUBJECT	BRI	E Portofino MF I	Property Owner LLC							
SC DG LC			Name of	Limit	ed Liability C	Company		• • •		
The enclos Existence,	sed "Ap	plication by Fore	eign Limited Liability Com I to register the above refer	oany i enced	for Authoriza foreign limit	tion to Tra ed liability	nnsact Busines y company to t	s in Flor transact l	ida," Co ousines	ertificate of s in Florida.
Please retu	urn all c	orrespondence co	oncerning this matter to the	follo	wing:					
		BRE Portofino	MF Property Owner LLC							
			N	ame o	of Person					
		c/o Blackstone l	Real Estate Associates L.L.	C.						
			F	irm/C	ompany			•		
		345 Park Avenu	e							
				Ad	dress					
		New York, NY	10154							
			City/S	tate a	nd Zip Code					
		<u> </u>	E-mail address: (to be used	d for	future annual	report not	ification)	root state	200 200 200	
For further	r inform	nation concerning	this matter, please call:							
C	Olivia J	ohn		at (212	583-50	00	177	2	
Name of Contact Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314				Area Code	STREET ADDRESS:		er () SS W	Ö		
		ck for the following Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status		\$155.00 Filin rtified Copy	g Fee &	□ \$160.00 l of Status &	_		ficate

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:

. BRE Portofino MF Pro	perty Owner LLC lign Limited Liability Company	y; must include "Limited Lis	bility Company," "L.L.C.," o	or "LLC.")	_
If name unavailable, enter al .iability Company," "L.L.C,"	ternate name adopted for the pr	urpose of transacting busine	ss in Florida. The alternate na	ime must include "I	Limited
Delaware	or sacce.	2			
(Jurisdiction under the law	of which foreign limited liabili	3	(FEI number, if applicabl	c)	
company is organized)					
	(Date first transacted b	usiness in Florida, if prior to	registration.)		
(701 1 4 77 177	(See sections 605.0904 &	t 605.0905, F.S. to determin	e penalty liability)		
C/O Blackstone Real Es	tate Associates L.L.C., 345	Park Avenue, New York	NY 10134	-	
	(Street Addres	s of Principal Office)		_	
				5.1 , 6 5	
	(Mai	ling Address)			
Name and street addres	s of Florida registered agent	: (P.O. Box NOT accept	table)	1 · · · · · · · · · · · · · · · · · · ·	£
N	Corporation Service Comp	pany	•	S2	1
Name:	1201 Hays Street		_	711	į i
Office Address:					
	Tallahassee		_ , Florida 32301		
egistered agent's accept	(Cit	y)	(Zip code)		
esignated in this applicate complywith the provision	gistered agent and to acception, I hereby accept the appoint of all statutes relative to my position as registered age Corporation Service Con	pointment as registered a the proper and complete	gent and agree to act in to performance of my dutie	his capacity. I fu	rther agr
	By:	Legistered agent a signature)		Vice Presiden	t
	city and address of the person, c/o Blackstone Real Esta	on(s) who has/have author		NY 10154	
Attached is a certificate risdiction under the law of the translator must be su	of existence, no more than 9 of which it is organized. (If the bmitted)	00 days old, duly authentiche certificate is in a forei	cated by the official having gn language, a translation of	custody of recor	ds in the inder oath
	Sign	ature of an authorized perso	<u> </u>		
	in accordance with section (the Department of State cor				п
•		Olivia John			
	Τ	t or printed name of signer		_	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BRE PORTOFINO MF PROPERTY 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 TWENTY-FOURTH DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRE PORTOFINO MF PROPERTY OWNER LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JUNE,

A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

Authentication: 202552918

Date: 06-24-16

6075700 8300

SR# 20164632487

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