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(Requestor's Name)
(Address)
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(0) (0) (7)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special mediations to 1 ming officer.

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RECEIVED
2017 MAR 29 PM 1:

K. SALY MAR 3 0 2017 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 573530 4361510

AUTHORIZATION : Spullelen

COST LIMIT : \$\frac{1}{2}5\times00

ORDER DATE: March 28, 2017

ORDER TIME : 12:40 PM

ORDER NO. : 573530-005

CUSTOMER NO: 4361510

#### FOREIGN FILINGS

NAME: CI ORL I-PRU, 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:

#### **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT: CI ORL I-PRU, LLC				
Name of Limited Liability Company				
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of 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:				
Director of Legal				
Name of Person				
CI ORL I-PRU, LLC				
Firm/Company				
515 S. Flower St., 44th Floor				
Address				
Los Angeles				
City/State and Zip Code				
lbodenstein@colonyinc.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Linda Bodenstein 310 552-7180				
Name of Contact Person Area Code Daytime Telephone Number				
MAILING 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:  \$\Begin{array}  \precedent{125.00 Filing Fee} & \Begin{array}  \precedent{130.00 Filing Fee} & \Begin{array}  \Precedent{155.00 Filing Fee} & \Begin{array}  \Precedent{160.00 Filing Fee}, Certificate \\ Certificate \\ Certificate \\ Copy \end{array} \$ 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: CI ORL I-PRU, 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.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) n/a (Date first transacted business in Florida, if prior to registration,) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 515 S. Flower St., 44th Floor, Los Angeles, CA 90071 (Street Address of Principal Office) 6. 515 S. Flower St., 44th Floor, Los Angeles, CA 90071 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: CIR III-I REIT, managing member 515 S. Flower St., 44th Floor, Los Angeles, CA 90071 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. 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.)

Typed or printed name of signee

David A. Palamé

## 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.

1. The nam	ne of the Limited Liability Company is:	
If unavailat	ole, the alternate to be used in the state of Florida is:	
2. The nam	ne and the Florida street address of the registered agent and office are:	2011 HAR 29
	Corporation Service Company	30000000000000000000000000000000000000
	(Name)	المسارق المسارة
	1201 Hays Street	19. <b>圣</b> 1
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	- 188
	Tallahassee 32301	••
	City/State/Zip	<del>-</del>

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.

Corporation 9	Service Company	Melissa Zender
Ву:	M. Zmits	Asst. Vice President
	(Signature)	

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

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CI ORL I-PRU, LLC" IS DULY FORMED

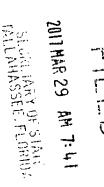
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TWENTY-EIGHTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CI ORL I-PRU, LLC" WAS FORMED ON THE TWENTIETH DAY OF MARCH, A.D. 2017.

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





Authentication: 202279721

Date: 03-28-17

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