M9800001237

W.P. Verifier

		`	•
17 V 197	- Andrews - Andr		
CT CORPORATION SYSTEM		200002670592	. Ta
Requestor's Name 660 East Jefferson Stree	et	20002670592 -10/23/3801001001 *****285.00 *****285.(00
Address Tallahassee, FL 32301	222-1092		
City State Zip	Phone	200002670592 -10/23/9801001002 *****113.75 *****113.7	-9
CORPORATION	N(S) NAME	****113.75 ****113.7	(5
	E. C. M. G. Basel	a fact of the second of the se	
		98	;
	3		
Glenborough tour	o IX CCC	22 FARE	
Glenon a-th tea) <u></u>
**Square Offices		3) L5	
() Proi定 : () NonEroiit	() Amendme	ω	
Gimited Liability Co.	() Dissolution	n/Withdrawal () Mark	
() Limited Partnership () Reinstatement	() Annual Re () Reservation		ing
Certified Copy (2)	() Photo Co		
() Call When Ready Walk in () Mail Out	() Call if Pro	blem () After 4:30 Pick Up	
		N	
Name Availability		PLEASE RETURN EXTRA CC)PIES
Document Examiner	10/22	TO JEFFREY D. BUTTERFI	ELD
Updater Verifier	*	•	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Name of foreign limited liability co L.C." if not so contained in the nam		d with the words "limited company"	or their abbreviation	,
Delaware	- ,	3 94-3311509		
(Jurisdiction under the law of which company is organized)		~	pplicable)	-
October 9, 1998	<u> 5</u>	2095		
(Date of Organization))	(Duration: Year limited liability cease to exist or "perpetual")	company will	,
October 23, 1998				
(Date first transacted b	ousiness in Flori	da. (See sections 608.501, 608.502	and 817.155, F.S.)	-
400 S. El Camino Re	eal, #1100) ·		
San Mateo, CA 9440:				-
	(Street ad	dress of principal office)		-
List name, title, and business ac	ddress of each	managing member [MGRM] o	or manager [MGR] v	who .
will manage the foreign limited	ddress of each l liability com	pany in Florida: (attach addition	onal page if necessa	who ry)
List name, title, and business acwill manage the foreign limited NAME & ADDRESS:	ddress of each l liability com TITLE:	managing member [MGRM] opany in Florida: (attach addition NAME & ADDRESS:	or manager [MGR] vonal page if necessa	who ry)
will manage the foreign limited	l liability com	pany in Florida: (attach addition	onal page if necessa	who ry)
will manage the foreign limited NAME & ADDRESS: RT IX, Inc.	l liability com	pany in Florida: (attach addition	onal page if necessa	who ry)
will manage the foreign limited NAME & ADDRESS: RT IX, Inc. 00 S. El Camino Real 1100	I liability com	pany in Florida: (attach addition	onal page if necessa	who ry)
will manage the foreign limited NAME & ADDRESS: RT IX, Inc. 00 S. El Camino Real 1100	I liability com	pany in Florida: (attach addition	onal page if necessa TITLE:	who ry) SECRE
will manage the foreign limited NAME & ADDRESS: RT IX, Inc. 00 S. El Camino Real	I liability com	pany in Florida: (attach addition	onal page if necessa TITLE:	who ry) BIVISION OF C
will manage the foreign limited NAME & ADDRESS: RT IX, Inc. 00 S. El Camino Real 1100	I liability com	pany in Florida: (attach addition	onal page if necessa TITLE:	who secretary of DIVISION Of CHRPP
will manage the foreign limited NAME & ADDRESS: RT IX, Inc. 00 S. El Camino Real 1100	I liability com	pany in Florida: (attach addition	TITLE: 98 007 22	who SECRETARY OF STA
will manage the foreign limited NAME & ADDRESS: RT IX, Inc. 00 S. El Camino Real 1100	I liability com	pany in Florida: (attach addition	TITLE: 98 007 22	SECRETARY OF STATE SINISION OF CHRPORATE
will manage the foreign limited NAME & ADDRESS: RT IX, Inc. 00 S. El Camino Real 1100	I liability com	pany in Florida: (attach addition	TITLE: 98 0CT 22 PM 3:	who SECKETARY OF STATE BIVISION OF CHRPORATIONS
will manage the foreign limited NAME & ADDRESS: RT IX, Inc. 00 S. El Camino Real 1100	I liability com	pany in Florida: (attach addition	TITLE: 98 0CT 22 PM 3:	SECRETARY OF STATE SINISION OF CHRPORATE

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy is not acceptable. If the certificate is in a foreign

language, a translation of the certificate under oath of the translator must be submitted.)

(FL057 - 4/23/98)

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GLENBOROUGH FUND IX 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 NINETEENTH DAY OF OCTOBER, A.D. 1998.

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



Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

9360402

981401894

2954198 8300

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, 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 name of the Limited Liability Company is:		
	Glenborough Fund IX LLC		
2.	The name and the Florida street address of the registered agent and office are:		
	C T CORPORATION SYSTEM	•	
	(Name)		
	1200 South Pine Island Road	_	
	Florida street address (P.O. Box NOT ACCEPTABLE)		
	Plantation FL 33324	-	
	(City/State/Zip)	, ,	
liabi agen rela	ing been named as registered agent and to accept service of process for the above ility company at the place designated in this certificate, I hereby accept the appoint and agree to act in this capacity. I further agree to comply with the provisions ting to the proper and complete performance of my duties, and I am familiar with gations of my position as registered agent.	ntment as registered of all statutes	đ
СТ	CORPORATION SYSTEM C. Morales Special Asst. Secretary		
	(Signature)	SECRETARY DIVISION OF C	
	Filing Fee: \$35 for Designation of Registered Agent		

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The	e undersigned r	nember or authorized representative of a member of Glenboroug	h
	Fund IX LLC	certifies:	
1)	the above nam	ned limited liability company has at least two members;	<i>:</i>
2)	the total amou	ant of cash contributed by the member(s) is	\$;
3)	37	eed value of property other than cash contributed by member(s) is of the property is attached and made a part hereto.)	213,700,000 \$;
	the total amou by member(s)	ant of cash and property contributed and anticipated to be contributed is ludes amounts from 2 and 3 above.)	\$215,837,000
	 By	GRT IX, Inc. Managing Member	<i>;</i>
	<u></u>	Signature of a member or authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Alan Shapiro, Vice President Typed or printed name of signee	SECRETARY OF STATE DIVISION OF CORFORMION SECRETARY OF STATE OF ST

Filing Fee: \$250.00 for Application and Affidavit

Attachment to Application by Glenborough Fund IX LLC for Authorization to Transact Business in Florida

The property that will be contributed by the members consists of 15 parcels of real property held for lease located in 10 states. One parcel is located in Florida having an agreed value of \$7,362,000.

DIVISION OF CHEFORATIONS