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Requestor's Name	- 12 · 12 · 12 · 12 · 12 · 12 · 12 · 12			
660 East Jefferson St	15 1	00003069 -12/14/990	8462	
Address Tallahassee, FL 32301		-12/14/33u ****125.00	****125.00	
City State Zip				
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Verifler Acknowledgment				

W.P. 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	ı lim	nited fiability company)
Delaware	2	52-2204939
(Jurisdiction under the law of which foreign limited liability	٠,	(FEI number, if applicable)
company is organized)		· · · · · · · · · · · · · · · · · · ·
November 16, 1999	5.	2027
(Date of Organization)	•	(Duration: Year limited liability company will cease to exist or "perpetual")
December 20, 1999		··
(Date first transacted business in Florida. (Se	ee se	ections 608.501, 608.502, and 817.155, F.S.)
c/o Alliance Commercial Holidings II, LLC, Union Tower,	. Su	ite 380, 165 South Union Blvd., Lakewood, CO80228
	,	
(Street addres	ss of	principal office)
If limited liability company is a manager-manage	d a	
if finited flatinty company is a manager-manager	u cc	RIDA ST
The usual business addresses of the managing me	mb	ers or managers are as follows:
V V		· G .
Florida Office Associates Managing Member, LLC, c/o A	Hiar	ice Commercial Holdings II, LLC, Union Tower,
Suite 250 1/5 Cough Hairan Plant Falancesis CO 90020		
Suite 380, 165 South Union Blvd., Lakewood, CO 80228		
). Attached is an original certificate of existence, no more than 9		• • •
e jurisdiction under the law of which it is organized. (A photoco	оруі	is not acceptable. If the certificate is in a foreign language, a
•	оруі	is not acceptable. If the certificate is in a foreign language, a
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e jurisdiction under the law of which it is organized. (A photocounslation of the certificate under eath of the translator must be suit. Nature of business or purposes to be conducted of real estate. Signature of a member or an a	opy i bmi or p	is not acceptable. If the certificate is in a foreign language, a tted.)

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:

Florida Office Associates, LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System	99 SECI
(Name)	FIL DEC 1 AHASS
c/o C T Corporation System, 1200 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE)	Y OF S
Plantation FL 33324	2: 46 TATE ORIDA

City/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 608, F.S..

C T Corporation System

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

FL054 - 9/28/99 C T System Online

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FLORIDA OFFICE ASSOCIATES, 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 SEVENTEENTH DAY OF NOVEMBER, A.D.

1999.

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

99 DEC 14 PH 2: 46

Edward J. Freel, Secretary of State 0088069

DATE:

AUTHENTICATION:

11-17-99

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