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| (Requestor's Name)                      |
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|   |
| (Address)                               |
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| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| <u> </u>                                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
| 6                                       |
| A. LUNT                                 |
| APR -1 2010                             |
|   |
| EXAMINER                                |
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Office Use Only



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#### **COVER LETTER**

TO:

Registration Section

| SUBJECT: 4                       | 01 and 528 South I   | Eighth Street LLC Name of Limited Liability Company  |               |                     |
|----------------------------------|--|--|---------------|---------------------|
| The enclosed "<br>Existence, and | Application by Foreign Limited I   | Liability Company for Authorization to Transact Business in Florida<br>ne above referenced foreign limited liability company to transact bus | ," Certifi    | icate of<br>Florida |
| Please return al                 | Il correspondence concerning this  | s matter to the following:   |               |                     |
|                                  | Bette Rueda  |  |               |                     |
|                                  |  | Name of Person   |               |                     |
|                                  | Standard Insurance Co  | ompany Sa  | 2011 KAR      | , sandarali         |
|                                  |  | Firm/Company   | AR            | mar History         |
|                                  | 1100 SW Sixth Avenu  | ្នេក<br>មា<br>Je<br>m <sub>e</sub> ្ល  | <u> </u>      |                     |
|                                  |  | Address  | PK            | 2,                  |
|                                  | Portland, OR 97204   |  | 2: 2 <b>:</b> |                     |
|                                  |  | City/State and Zip Code  |               |                     |
|                                  | regulatory@standa  | rd com   |               |                     |
|                                  | E-mail addres  | s: (to be used for future annual report notification)  | -             |                     |
| For further info                 | ormation concerning this matter, p   | please call:   |               |                     |
|                                  |  | 07/  |               |                     |
| Bette                            | e Rueda  | at (971 ) 321-6721   | -             |                     |
|                                  | Name of Person   | Area Code & Daytime Telephone Number   |               |                     |
| Divisi                           | ING ADDRESS:<br>on of Corporations<br>ration Section                                       | STREET ADDRESS: Division of Corporations Registration Section  |               |                     |
|                                  | ox 6327  | Clifton Building   |               |                     |
| ranan                            | assee, FL 32314  | 2661 Executive Center Circle Tallahassee, FL 32301   |               |                     |
|                                  | check for the following am<br>00 Filing Fee \$\frac{1}{2}\$130.00 Filing<br>Certificate of | g Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certific  |               |                     |

### 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:

| 1. 401 and 528 South Eighth Street 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 and consent of the managers or managing members adopting the alternate name. The alternate name must in Company," "L.L.C," "LLC.")   |   |   |
| 2. Oregon  (Jurisdiction under the law of which foreign limited liability company is organized)  3. 27-4286722  (FEI number, if applied)   | cable)  | -   |
| 4. June 25, 2010  (Date of Organization)  5. perpetual (Duration: Year limited liability coexist or "perpetual")   | impany will cease to                          | -   |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)  7.  | 2011 KAR                                      | -<br>: ************************************ |
| 19225 NW Tanasbourne Drive, Hillsboro, OR 97124 (Street Address of Principal Office)   | <u>ශ්                                    </u> | - [7  |
| 8. If limited liability company is a manager-managed company, check here   | PM 2: 28                                      | 77.0,544                                    |
| 9. The name and usual business addresses of the managing members or managers are a StanCorp Mortgage Investors, LLC  | as follows:                                   | _   |
| 19225 NW Tanasbourne Drive Hillsboro, OR 97124   |   | -   |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a translation of the certificate under oath of the translator must be submitted.) |   | xords in                                    |
| 11. Nature of business or purposes to be conducted or promoted in Florida: real estat  | te management                                 | -   |
| Signature of a member or an authorized representative of a mem   | ber.  |   |
| (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirm   | ation 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.)

Amy Frazey, Assistant Vice President, StanCorp Mortgage Investors, LLC

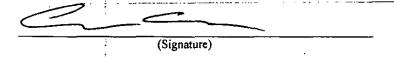
Typed or printed name of signee

## 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 L                  | imited Liability   | Company is:                                   | •                 |              |
|---------------------------------------|--------------------|---|-------------------|--------------|
| 401 and 528 S                         | outh Eighth        | Street LLC                                    |                   |              |
| If unavailable, the alte              | ernate to be used  | in the state of Florida is:                   |                   |              |
| 2. The name and the                   | Florida street add | dress of the registered agent and office are: |                   | <del>-</del> |
| стс                                   | orporation Sys     | stem  | ,-a1              |              |
|                                       |                    | (Name)  |                   |              |
| 1200                                  | South Pine         | Island Road                                   | 2011 MAR (        | 1            |
| <del></del>                           | Florida Stre       | et Address (P.O. Box NOT ACCEPTABLE)          | — 23.% — <b>3</b> | -            |
|                                       | 1 4.               | 00004   | PR                |              |
| Plan                                  | itation            | FL 33324                                      |                   |              |
| , , , , , , , , , , , , , , , , , , , |                    | City/State/Zip                                | 間がで               |              |

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, Florida Statutes.



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

#### CERTIFICATE -

## State of Oregon

#### OFFICE OF THE SECRETARY OF STATE Corporation Division

I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

#### 401 AND 528 SOUTH EIGHTH STREET LLC

was

organized

under the Oregon

Limited Liability Company Act

on

June 25, 2010

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

KATE BROWN, Secretary of State

Ву

Debra L. Virag

March 30, 2011