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Florida Department of State
Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : CORPORATION SERVICE COMPANY *hcc*

Account Number : I20000000195

Phone : (850) 521-1000

Fax Number : (850) 558-1575

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FLORIDA/FOREIGN LP/LLP

NF 106 LAKESIDE VILLAGE LIMITED PARTNERSHIP

Certificate of Status	0
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APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

1. NF 106 Lakeside Village Limited Partnership

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Delaware

(State or Country of Formation)

3. 8/3/07

(Date of Formation)

4. Corporation Service Company

(Name of Registered Agent for Service of Process)

5. 1201 Hays Street

(Florida street address for Registered Agent)

Tallahassee, FL 32301

6. 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 relative to the proper and complete performance of my duties,
and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: Heather Chapman
Signature of Registered Agent

Heather Chapman
as its agent

7. 2001 Bryan Street, Suite 3700, Dallas, TX 75201

(Principal office address)

8. If limited partnership is a limited liability limited partnership, check box ☐

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9. 2001 Bryan Street, Suite 3700, Dallas, TX 75201

(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

NF 105 Development GP LLC

(Name)

2001 Bryan Street, Suite 3700

(Street Address)

Dallas, TX 75201

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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_____ (Name)	_____ (Street Address)
	_____ (Mailing Address)
_____ (Name)	_____ (Street Address)
	_____ (Mailing Address)

11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 3rd day of August, 20 07

Signature of a general partner:

Laura Hopkins
Assistant Secretary

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TALLAHASSEE, FLORIDA

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Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NF 106 LAKESIDE VILLAGE LIMITED PARTNERSHIP" 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 THIRD DAY OF AUGUST, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NF 106 LAKESIDE VILLAGE LIMITED PARTNERSHIP" WAS FORMED ON THE THIRD DAY OF AUGUST, A.D. 2007.

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

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TALLAHASSEE, FLORIDA



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Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5901998

DATE: 08-03-07