

Electronic Filing Cover Sheet

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TQ;

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

Please check on
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LP/LLP

Cole PB Portfolio I, LP

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Page Count	986
Estimated Charge	\$1,008.75

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EXAMINER

3/10/2008

TRANSMISSION VERIFICATION REPORT

TIME : 03/10/2008 13:15
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FAX :
TEL :
SER.# : BROK7J715814

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Electronic Filing Menu

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Cole PB Portfolio I, LP

FLORIDA/FOREIGN LP/LP

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Account Number : PCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

To: Division of Corporations
Fax Number : (850) 617-6383

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. Cole PB Portfolio I, LP

(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. February 28, 2008

(Date of Formation)

4. _____

CT Corporation System

(Name of Registered Agent for Service of Process)

5. _____

1200 South Pine Island Road, Plantation, Florida 33324

(Florida street address for Registered Agent)

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.

CT Corporation System

By: Maria Ozasta Maria Ozasta
Signature of Registered Agent Vice President

7. c/o Cole Companies, 2555 East Camelback Road, Suite 400, Phoenix, Arizona 85016

(Principal office address)

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

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SECRETARY OF STATE
DIVISION OF CORPORATION

9. c/o Cole Companies, 2555 East Camelback Road, Suite 400, Phoenix, Arizona 85016

(Mailing address)

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

Cole GP CCPT II, LLC

(Name)

c/o Cole Companies
2555 East Camelback Road, Suite 400

(Street Address)

Phoenix, Arizona 85016

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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

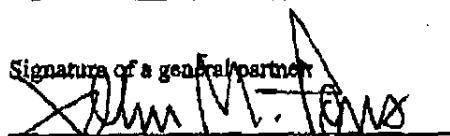
11. Effective date, if other than the date of filing: _____

(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 6th day of March, 20 08

Signature of a general partner


 John Pons, Exec. Vice Pres. of Cole RBIT Advisors
 II, LLC, Manager of Cole GP CCPT II, LLC

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COLE PB PORTFOLIO I, LP" 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-NINTH DAY OF FEBRUARY, A.D. 2008.

4512287 8300

080255012

You may verify this certificate online
at corp.delaware.gov/authver.shtml



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6418431

DATE: 02-29-08