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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORID

FILED

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ATTN Staces

Per Debbre Skipper (she called you monday about filing this trust)

ACCOUNT NO. : 072100000032

REFERENCE: 510944

4305738

COST LIMIT

ORDER DATE: July 28, 2005

ORDER TIME: 11:02 AM

ORDER NO. : 510944-005

CUSTOMER NO: 4305738

CUSTOMER:

Katharine A. Schkloven

Hirschler Fleischer

Bldg. 701

P. O. Box 500

Richmond, VA 23218-0500

#### FOREIGN FILINGS

NAME:

NNN SANCTUARY AT HIGHLAND

OAKS, DST

XXXX QUALIFICATION (TYPE: BST)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PER BETH AT SOS CERT. OF EXISTENCE IS INCLUDED IN FILING FEE

CONTACT PERSON: Denise Mick -- EXT# 2950

EXAMINER:

## AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE TO FILE OR QUALIFY

### NNN SANCTUARY AT HIGHLAND OAKS, DST

A Delaware TRUST
In accordance with Section 609.02 of the Florida Statutes, pertaining to Common Declarations of Trust, the undersigned, the Chairman of the Board of Trustees of NNN Sanctuary at Highland Oaks Trustee. LLC, a Delaware Trust hereby affirms in order to file (Name of Trust)  Or qualify NNN Sanctuary at Highland Oaks, DST, in the State of Florida.
1. Two or more persons are named in the Trust.
2. The principal address is 1651 N. Tustin Avenue, Suite 200
Santa Ana, California 92705
The registered agent and street address in the State of Florida are:     Corporation Service Company
1201 Hays Street, Taliahassee, Fiorida 32301
4. Acceptance by the registered agent: Having been named as registered agent to accept service of process for the above named Declaration of Trust at the place designed in this affidavit, I bereby accept the appointment as registered agent and agree to act in this capacity.  April 1990
5. I certify that the attached is a true and correct copy of the Declaration of Trust under which the association proposes to conduct its business in Florida.
NNN Sanctuary at Highland Oaks Trusiee, LLC, the Signatory Trusiee  By: Triple Net Properties LLC, the: Manager
By: Louis J. Rogers, President  Fling Fee: \$350.00  Certified Copy: \$ 8.75 (optional)

County of  On	State of California	<b>)</b> .
Derisonally appeared    Coppeared   Coppea	county of <u>Orange</u>	<b>8</b> \$.
Description of Attached Document  Though the Information below is not required by law, p. nay prove valuable to persons relying on the document and acute prevent frauthent removal and resizations of this form to another document.  Description of Attached Document  Elle or Type of Document  Description of Attached Document  Dispersion of Attached Document  Dispersion of Attached Document  Dispersion of Attached Document  Dispersion Officer — Title(s):  Description of Content Name:  Individual:  Capacity(les) Claimed by Signer  Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer  Signer(s) Claimed in General  Attorney in Fact  Trustee  Guardian or Conservator	on July 27, 20 before me, _	Youra Fox Buchan Nartie and fifther of Coffeet (e.g., - Jane Doe, Notary Profile)
Though the Inflormation below is not required by law, it may prove valuable to prevent fraudulent removal and could prevent fraudulent removal and reattachment of this form to another document.  **Description of Attached Document**  Title or Type of Document**  Description of Attached by Signer Signer's Name:  Individual  Corporate Officer — Title(s):  Partner — Li Limited [] General  Attorney in Fact  Trustee  General to the person(s) whose marne(s) is/are subscribed to the person(s) is/are subscribed to the within instrument and acknowledged to me on the historiental the person(s) acknowledged to me on the historiental the person(s) and that his/she/they executed the signature(s) on the instrument he person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.  **WITNESS my hand and official seal.**  *		LAUG J. KARPERS
subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(les), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.  WITNESS my hand and official seal.  Phase Notary seal Above  OPTIONAL  Though the Information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reatlandment of this form to another document.  Description of Attached Document  Title or Type of Document  Document Date:  Signer's Name:  Individual  Corporate Officer — Title(s):  Partner — I. Limited I.I General  Attorney in Fact  Trustee  Geuerdian or Conservator		personally known to me
the entity upon behalf of which the person(s) acted, executed the instrument.  ORANGE COUNTY COMM. EXP. OCT. 15, 2005  WITNESS my hand and official seal.  WITNESS my hand and		subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(les), and that by his/her/their
Place Notary Seal Above  OPTIONAL  Though the Information below is not required by law, it may prove valuable to persons rolying on the document and could prevent fraudulent removal and realizachment of this form to enother document.  Description of Attached Document  Pitle or Type of Document  Cocument Date:  Signer(s) Other Than Named Above:  Capacity(les) Claimed by Signer  Signer's Name:  Individual  Corporate Officer — Title(s):  J. Partner — J. Limited [] General  Attorney in Fact  Trustee  Gluardian or Conservator	COMM. # 1519371	the entity upon behalf of which the person(s)
Though the Information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to enother document.  Description of Attached Document  Title or Type of Document  Document Date:  Number of Pages:  Signer(s) Other Than Named Above:  Signer's Name:  Individual  Corporate Officer — Title(s):  Partner — U Limited [T] General  Attorney in Fact  Trustee  Guardian or Conservator	COMM EIP, OCT. 15, 2008	WITNESS my hand and official seal.
Though the Information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reatachment of this form to enother document.  Description of Attached Document  Title or Type of Document  Document Date:  Number of Pages:  Signer(s) Other Than Named Above:  Signer's Name:  Individual  Corporate Officer — Title(s):  Partiner — L. Limited L. General  Attorney in Fact  Guardian or Conservator	Pince Notiny Sag! Above	Signature of Notary Public
Description of Attached Document Tile or Type of Document  Document Date:  Document Date:  Digner(s) Other Than Named Above:  Digner's Name:  Individual  Corporate Officer — Title(s):  Partner — Li Limited LT General  Attorney in Fact  Guardian or Conservator		PTIONAL -
Cocument Date:	Though the information below is not required by la and could prevent fraudulent removal a	w, it may prove valuable to persons relying on the document nd realiachment of this form to enother document.
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Capacity(les) Claimed by Signer  Signer's Name:  Individual  Corporate Officer — Title(s):  Partner — Limited IT General  Attorney in Fact  Trustee  Guardian or Conservator	Document Date:	Number of Pages:
Signer's Name:  Individual  Corporate Officer — Title(s):  Partner — L. Limited [7] General  Attorney in Fact  Trustee  Guardian or Conservator	Signer(s) Other Than Named Above:	
Individual Corporate Officer — Title(s): Individual Corporate Officer — Title(s): Individual Indivi	Capacity(les) Claimed by Signer	RIGIDI THUIASPRINT
Partner — U Limited □ General  Attorney in Fact Trustee Guardian or Conservator	. Individual	· · · · · · · · · · · · · · · · · · ·
. Trustee . Guardian or Conservator		
: Guardian or Conservator	: Attorney in Fact	
i i		
	: Other:	

## CERTIFICATION OF TRUST BY THE SIGNATORY TRUSTEE

#### OF

#### NNN SANCTUARY AT HIGHLAND OAKS, DST

The undersigned is the Signatory Trustee of NNN Sanctuary at Highland Oaks, DST (the "Trust") and, by signing below, hereby certify as follows:

1. The name of the Trust is "NNN Sanctuary at Highland Oaks, DST," and the following are all of the Trustees of the Trust as of the date hereof:

Wilmington Trust Company - Delaware Trustee NNN Sanctuary at Highland Oaks Trustee, LLC - Signatory Trustee Douglas A. Britton - Independent Trustee

- 2. Attached hereto is a true, correct and complete copy of the Trust Agreement for the Trust, dated July 21, 2005 (the "Trust Agreement").
- 3. The Trust Agreement is in full force and effect and has not been amended or modified in any respect.
- 4. No proceeding is pending, planned or threatened for dissolution of the Trust, and no event exists which, with the passage of time or the giving of notice or both, would constitute a default under the Trust Agreement or grounds for the dissolution of the Trust.
- 5. Pursuant to the terms of the Trust Agreement, the undersigned Signatory Trustee is authorized to act for and on behalf of the Trust and to execute any and all documents related to and in connection with the qualification of the Trust in Florida.
- 6. The Secretary of State of the State of Florida shall be entitled to act in reliance upon the matters herein contained without further inquiry of any kind. This Certification shall continue in full force and effect until written notice of revocation thereof has been actually received by such parties.

EXECUTED the	day of August, 2005.	
	uay of August, 2005.	

NNN Sanctuary at Highland Oaks Trustee, LLC, a Delaware limited liability company

By: Triple Net Properties, LLC a Virginia limited liability company

Its: Sole Member

By:

Louis J. Rogers, President

STATE OF <u>California</u> \$ COUNTY OF <u>Orange</u> \$

On August \_\_\_\_, 2005, before me, Loura Tox Ouchap a Notary Public for said state, personally appeared Louis J. Rogers, President of Triple Net Properties, LLC, the sole member of NNN SANCTUARY AT HIGHLAND OAKS TRUSTEE, LLC, a Delaware limited liability company, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his authorized capacity, and that by his/her signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Notary Public

Printed Name: Laura Fox Buchan

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