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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Charles Instructions to Filing Officer					
Special Instructions to Filing Officer;					





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ACCOUNT NO. : 07210000032

REFERENCE : 913480

AUTHORIZATION :

COST LIMIT : \$ 160.00

ORDER DATE: October 4, 2004

ORDER TIME : 10:22 AM

ORDER NO. : 913480-060

CUSTOMER NO: 4305738

CUSTOMER: Ms. Christy Hall

Hirschler Fleischer

P. O. Box 500

Richmond, VA 23218-0500

FOREIGN FILINGS

NAME: NNN FOUNTAIN SQUARE 12, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX____ CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Brenda Sharpless -- EXT# 2918

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATIO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER AFOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Y COMPANY TO TRANSACT BUSINESS IN T	HE SI	ATEOF FLORIDA:
I. <u>NNN FO</u>	UNTAIN SQUARE 12, LLC (Name of Foreign Limite	d Lial	bility Company)
2. DELAW/ (Jurisdiction un company is org	ARE der the law of which foreign limited liabilit	3	(FEI number, if applicable)
1. <u>SEPTEN</u>	MBER 28, 2004 (Date of Organization)	5.	PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6. <u>IMMEDI</u>	ATE UPON FILING OF THIS API (Date first transacted business in (See sections 608.501 & 608.502 I	Florid	ia, if prior to registration.)
7. <u>1551 N.</u>	TUSTIN AVENUE, SUITE 200		
SANTA	ANA, CALIFORNIA 92705 (Street Addre	ess of	Principal Office)
3. If limited lia	ability company is a manager-manag	ed co	ompany, check here X
The name a	nd usual business addresses of the m	anag	ing members or managers are as follows:
240 NW 4	OTH LAND TRUST, DATED AUG	3US	Γ 13, 1999
1525 N. P	ARK DRIVE, SUITE 102, WEST	ON,	FL 33326
hejurisdiction und ranslation of the o	der the law of which it is organized. (A photocertificate under oath of the translator must be s	copy is ubmitt	,
11. Nature of b	pusiness or purposes to be conducted	l or p	romoted in Florida: REAL ESTATE
TRANSA	CTION		
), F.S.,	orized representative of a member. the execution of this document constitutes that the facts stated herein are true.)

CHRISTY L. HALL, AUTHORIZED PERSON
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 Limited Liability Company is:	
_	NNN FOUNTAIN SQUARE 12, LLC	_
2.	The name and the Florida street address of the registered agent and office are:	
	Corporation Service Company	
	(Name)	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee FL 32301 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, Florida Statutes.

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

Delaware

The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NNN FOUNTAIN SQUARE 12, 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 TWENTY-NINTH DAY OF SEPTEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NNN FOUNTAIN SQUARE 12, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2004.

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

Warriet Smith Windson Secretary of State

AUTHENTICATION: 3380690

DATE: 09-29-04

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