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| (Re | equestor's Name) | |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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ACCOUNT NO. : 072100000032

REFERENCE :

408815

4305738

COST LIMIT :

ORDER DATE: June 3, 2005

ORDER TIME : 12:18 PM

ORDER NO. : 408815-100

CUSTOMER NO: 4305738

CUSTOMER: Ms. Karla S. Williams

Hirschler Fleischer

P. O. Box 500

Richmond, VA 23218-0500

FOREIGN FILINGS

NAME: NNN NAPLES LAUREL OAK 20, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

OS WAS PROPERTY.

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:

| | (Name of Foreign Limited Liability Company) | |
|--|--|---|
| Delaware | 2 N/A | |
| Jurisdiction under the company is organized) | law of which foreign limited liability 3. N/A (FEI num | ber, if applicable) |
| 5/23/05 | f Organization) 5. Perpetural (Duration: Year limite | |
| (Date o | f Organization) (Duration: Year limite exist or "perpetual") | d liability company will cease to |
| Immediately up | on filing this Application for Authority | |
| | (Date first transacted business in Florida, if prior to registration (See sections 608,501 & 608,502 F.S. to determine penalty liabil | i.) itv) |
| JEES W Thetin | | 2.00 |
| | Avenue, Suite 200 | · · · · · · · · · · · · · · · · · · · |
| Santa Ana, Cal: | | |
| | (Street Address of Principal Office) | |
| · | company is a manager-managed company, check here labeled business addresses of the managing members or man | |
| · | al business addresses of the managing members or man | |
| The name and usu | al business addresses of the managing members or man | |
| The name and usu Ruth C. Swanst 9828 Woodbride | al business addresses of the managing members or man | agers are as follows: |
| Ruth C. Swanst 9828 Woodbridg Ellicott City, Attached is an original | nal business addresses of the managing members or man | agers are as follows: |
| Ruth C. Swanst 9828 Woodbridg Ellicott City, Affached is an original jurisdiction under the lastation of the certificate | tal business addresses of the managing members or man ge Ct. MD 21042 I certificate of existence, no more than 90 days old, duly authenticated be aw of which it is organized. (A photocopy is not acceptable. If the cert | agers are as follows: by the official having custody of reclificate is in a foreign language, a |
| Ruth C. Swanst 9828 Woodbridg Ellicott City, Affached is an original jurisdiction under the lastation of the certificate | tal business addresses of the managing members or management. Tom The Ct. MD 21042 I certificate of existence, no more than 90 days old, duly authenticated be aw of which it is organized. (A photocopy is not acceptable. If the certicated cath of the translator must be submitted.) | agers are as follows: by the official having custody of reclificate is in a foreign language, a |
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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:

| Corporation Service Company |
|--|
| (Name) |
| 1201 Hays Street |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) |
| Tallahassee FI 32301 |
| City/State/Zip |

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NNN NAPLES LAUREL OAK 20, 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-FOURTH DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NNN NAPLES LAUREL OAK 20, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF MAY, A.D. 2005.

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

Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 3899838

DATE: 05-24-05

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