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| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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Fictitious Name

Reinstatement

Name Reservation

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, Florida 32301 (850) 681-6528

HOLD FOR PICKUP BY UCC SERVICES OFFICE USE ONLY

July 19, 2005

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Regency/Tampa, L.L.C.

| Reg | gency/Tampa, L.L.C. |
|--|---|
| | |
| Filing Evidence ☑ Plain/Confirmation Co | Type of Document Opy □ Certificate of Status |
| □ Certified Copy | □ Certificate of Good Standing |
| | □ Articles Only |
| Retrieval Request Dhotocopy | All Charter Documents to Include Articles & Amendments Fictitious Name Certificate |
| □ Certified Copy | □ Other |
| NEW FILINGS | AMENDMENTS |
| Profit | Amendment |
| Non Profit | Resignation of RA Officer/Director |
| Limited Liability | Change of Registered Agent |
| Domestication | Dissolution/Withdrawal |
| Other | Merger |
| | |
| OTHER FILINGS | REGISTRATION/QUALIFICATION |
| Annual Reports | Foreign |

X | Limited Liability

Trademark

Other

Reinstatement

| 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 ATFOREIGN AND LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: |
| Regency/Tampa, L.L.C. |
| (Name of Foreign Limited Liability Company) |
| 2. DE 3. (FEI number, if applicable) |
| company is organized) (FEI number, if applicable) |
| 4. May 18, 2005 5. Perpetual |
| (Date of Organization) (Duration; Year limited liability company will cease to exist or "perpetual") |
| 6. Upon sualification |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 3301 West End Avenue, Suite 200 |
| · |
| Nashville, TN 37203 (Street Address of Principal Office) |
| |
| 8. If limited liability company is a manager-managed company, check here |
| 9. The name and usual business addresses of the managing members or managers are as follows: |
| C. Harris Haston and L. Marc Carter |
| |
| 3301 West End Avenue, Suite 200 |
| Nashville, TN 37203 |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in |
| the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a |
| translation of the certificate under oath of the translator must be submitted.) |
| 11. Nature of business or purposes to be conducted or promoted in Florida: Own and operate |
| apartment complexes |
| 1 Thing 1 store |
| Signature of a member or an authorized representative of a member. |
| (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) |
| C. Harris Haston, Member |
| 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 na | ame of the Limited Liability | y Company is: |
|-----------|------------------------------|---|
| Regency/ | Tampa, L.L.C. | |
| 2. The na | ame and the Florida street a | address of the registered agent and office are: |
| | NRAI Services, Inc. | |
| | | (Name) |
| | 2731 Executive Park | |
| | Florida S | treet Address (P.O. Box NOT ACCEPTABLE) |
| | Weston | FL 33331 |
| | | 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. NRAI Services, Inc.

By: KISM Hand, ASST SEC

\$ 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 "REGENCY/TAMPA, L.L.C." 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 THIRTIETH DAY OF JUNE, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REGENCY/TAMPA, L.L.C." WAS FORMED ON THE SEVENTEENTH DAY OF MAY, A.D. 2005.

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

Warriet Smith Windson, Secretary of State

DATE: 06-30-05

AUTHENTICATION: 3993455

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