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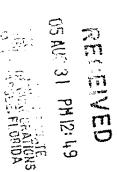
| (Re | equestor's Name) |
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| (Cit | ty/State/Zip/Phone #) |
| PICK-UP | Wait Mail |
| (Bu | isiness Entity Name) |
| (Do | cument Number) |
| Certified Copies | Certificates of Status |
| Special Instructions to | Filing Officer: |
| V | Office Heal Only |

Office Use Only



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ACCOUNT NO. : 072100000032

REFERENCE : 570832 4305738

SECRETARIA PARIS

AUTHORIZATION :

COST LIMIT : \$ 160.00

ORDER DATE: August 30, 2005

ORDER_TIME : 10:33 AM

ORDER NO. : 570832-265

CUSTOMER NO: 4305738

CUSTOMER: Ms. Celestine Pointer

Hirschler Fleischer

P. O. Box 500

Richmond, VA 23218-0500

FOREIGN FILINGS

NAME: NNN MAITLAND PROMENADE 30, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

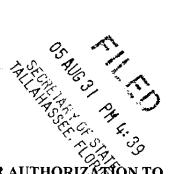
XX ____ CERTIFIED COPY

___ PLAIN STAMPED COPY

XX ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER:



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.

| #1911 4 F # 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | COME ANT TO TRAINACT BOSINESS IN THE STATE OF PLONDA. |
|---|---|
| . <u>NNN Maitlar</u> | nd Promenade 30, LLC (Name of Foreign Limited Liability Company) |
| | (Name of Poreign Limited Liability Company) |
| . Delaware | 3 |
| (Jurisdiction und company is orga | der the law of which foreign limited liability 3. (FEI number, if applicable) |
| August 26 | 5. Perpetual |
| (1) | 5. Perpetual Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") |
| Upon filing o | of this application for authority |
| | of 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 liability) |
| 1551 N. T | Sustin Avenue, Suite 200 |
| Santa Ana | a, CA 92705 |
| | (Street Address of Principal Office) |
| If limited lial | bility company is a manager-managed company, check here |
| The name an | nd usual business addresses of the managing members or managers are as follows: |
| Hamilton C | Chafee and Debra Oviatt |
| 137 Aubrur | 144 - |
| | n way, Vacaville, CA 95688 |
| jurisdiction und | original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recorder the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a rtificate under oath of the translator must be submitted.) |
| | , in the second |
| . Inature of b | susiness or purposes to be conducted or promoted in Florida: |
| Real Estate In | nvestment |
| | 1 holosline Benter |
| | 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.) |
| | Celestine Pointer, Authorized Representative |
| | 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 Maitland | i Promenade 30, LLC |
| 2. The name and | d the Florida street address of the registered agent and office are: |
| | Corporation Service Company |
| • | (Name) |
| - | 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE) |
| 5 | 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.

Corporation Service Company

By Atherine Spin Asst. Suretary

(Signature)

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

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NNN MAITLAND PROMENADE 30, 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-SIXTH DAY OF AUGUST, A.D. 2005_

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NNN MAITLAND PROMENADE 30, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF AUGUST, A.D. 2005.

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

Varriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4119850

DATE: 08-26-05

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