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FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 1333 N. DUVAL STREET, TALLAHASSEE, FL 32303

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 02-06-06

NAME: TIC VILLAGE SQUARE 4, LLC

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST: \$125 + \$5 + \$30= \$160

RETURN: GOOD STANDING/CERT. COPY

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/19.

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

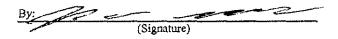
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|---|--|---|---|--|---------------------------------------|--------------|
| l'IC Village S | Square 4, LLC | | | | - | 2 3 |
| | (Name of For | reign Limited Li | ability Compa | ny) | 6 | 52 6 |
| | Delaware | 3. | | | | |
| urisdiction u ompany is or | nder the law of which foreign lin ganized) | nited liability | - | (FEI number, if a | pplicable) | (5) EX (1) |
| | January 10, 2006 | 5. | | Perpetual | | 70 |
| | (Date of Organization) | · | (Duration: exist or "pe | Year limited liability rpetual") | company w | ill celes to |
| <u></u> | (Date first transacted | business in Flor | ida, if prior to | registration.) | <u> </u> | |
| | (See sections 608.501 a | | · . | | | |
| | 1412 West Id | aho St., Suite 21 | 0, Boise, ID 8 | 3702 | | |
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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.

| i | The name of the Limited Liability Company is: CIC Village Square 4, LLC | | | | | | | |
|----------------|--|--|--|--|--|--|--|--|
| 2. The name ar | nd the Florida street address of the registered agent and office are: | | | | | | | |
| | Registered Agent Solutions, Inc. | | | | | | | |
| • | (Name) | | | | | | | |
| · | 1333 N. Duval Street | | | | | | | |
| | Florida Street Address (P.O. Box NOT ACCEPTABLE) | | | | | | | |
| | Tallahassee, Florida 32303 | | | | | | | |
| • | 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

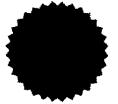
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TIC VILLAGE SQUARE 4, 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 ELEVENTH DAY OF JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TIC VILLAGE SQUARE 4, LLC" WAS FORMED ON THE TENTH DAY OF JANUARY, A.D. 2006.

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



Variet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4439767

DATE: 01-11-06

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