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SECRET SECRETARY



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SECRETARY OF STATE TALL AHASSEE FLORIDA 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:

Campus Lodge TIC 3, LLC	
(Name of Foreign Limite	d Liability Company)
 Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 	y (FEI number, if applicable)
4. 1/31/06 (Date of Organization)	5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business in (See sections 608.501 & 608.502 F	Florida, if prior to registration.) F.S. to determine penalty liability)
225 S. Lake Ave, Suite 650, Pasadella, CA 91 101	
(Street Addre	ess of Principal Office)
3. If limited liability company is a manager-manage	ed company, check here
 The name and usual business addresses of the management of the manageme	Ç Ç
•	90 days old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a ubmitted.)
11. Nature of business or purposes to be conducted	or promoted in Florida: Ownership of real estate.
(In accordance with section 608.408(3)	authorized representative of a member. authorized representative of a member. p. F.S., the execution of this document constitutes beginning that the facts stated herein are true.)

Typed or printed name of signee



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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE CRETATION OF STATE TALLAHASSEE. FLORIDA

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.

The name of the Limited Liability Company is: Campus Lodge TIC 3, LLC		
ress of the registered agent and office ar	e:	
is Inc.		
(Name)		
Address (P.O. Box NOT ACCEPTABLE)	<u> </u>	
FL 32351		
City/State/Zip		
	t Address (P.O. Box <u>NOT</u> ACCEPTABLE) FL 32351	

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)

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SECREMENT OF STATE TALLAMASSEE, FLORIDA

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAMPUS LODGE TIC 3, 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 FIRST DAY OF FEBRUARY, A.D. 2006.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAMPUS LODGE TIC 3, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF JANUARY, A.D. 2006.



Warriet Smith Hindson
Harrier Smith Windson Secretary of State

AUTHENTICATION: 4492222

DATE: 02-01-06

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