Florida Department of State

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To:

Division of Corporations

.Fax Number : (850)205-0383

From: .

: TRIAD PROFESSIONAL SERVICES, LLC Account Name

Account Number : I20020000094 : (770)777-2091

Phone : (770)220-1943 Fax Number

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LORIDA/FOREIGN LIMITED LIABIL					
C	A/FOREIGN LIMITED LIABILI Cole IN Davie FL, LLC Certificate of Status 0				
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Estimated Cl	narge	\$155.00			

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Cole IN Davie FL, LLC	
(Name of Lit	nited Liability Company)
The enclosed "Application by Foreign Limited L. Florida," Certificate of Existence, and check are liability company to transact business in Florida	iability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited
Please return all correspondence concerning this	matter to the following:
John M. Pons	
(N	ame of Person)
•	S S S S S S S S S S S S S S S S S S S
Cole Companies	
(F	SECRETARY) Firm/Company) 2 2 2 2 2 2 2 2 2 2 2 2 2
2555 E. Camelback Road, Suite 400	
	(Address)
Phoenix, Arizona 85016	IDA 29
(City/s	State and Zip Code)
For further information concerning this matter, p	
(Name of Person)	at ()
STREET ADDRESS: Registration Section Division of Corporations 409 B. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
☐ \$125.00 Piling Fee ☐ \$130.00 Filing Fee Contificato	

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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: 1. Cole IN Davie FL, LLC (Name of Foreign Limited Liability Company) 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 5. Perpetual 4, 11/13/2006 (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date tirst transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 2555 E. Camelback Road, Suite 400, Phoenix, Arizona: 85016 (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: Cole REIT Advisors II, LLC, a Delaware limited liability company 2555 E. Camelback Road, Suite 400 Phoenix, Arizona 86016 10. Attached is an original certificate of existence, no more than 90 days old, duly authoriticated by the official having custody of records in the jurisdiction under the law of which it is coganized. (A photocopy is not acceptable. If the cartificate is in a fureign language, a translation of the certificate under path of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: any lawful business Signature of a member or an authorized representative of a member. (In secondance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)

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Typed or printed name of signee

John M. Pens, Senior Vice President

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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.

1. The name of the Limited Liability	Company is:	
Cole IN Davie FL, LLC		
2. The name and the Florida street as	ddress of the registered agent and office are:	SECRE VALLARI
NRAI Services, Inc.	<u> </u>	ý₹ 2 I
	(Name)	
2731 Executive Park		: :9 :9 :9
Florida Sti	reet Address (P.O. Box NOT ACCEPTABLE)	9: 29 STATE ORIDA
Weston	17T 33331	

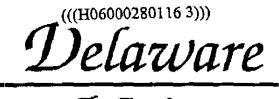
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

City/State/Zlp

By (Signature)

\$ 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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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COLE IN DAVIE FL, 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 FOURTEENTH DAY OF NOVEMBER, 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 SAID "COLE IN DAVIE FL, LLC" WAS FORMED ON THE THIRTEENTH DAY OF NOVEMBER, A.D. 2006.

Harriet Smith Windsor, Secretary of State

4250729 8300 061038951

AUTHENTICATION: 5194683

DATE: 11-14-06

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