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TIC ALTAMONTE SHS 2, LLC

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

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AUTHORIZATION: ABBIE/PAUL

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

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TIC Altamonte	Name of Forei	ign Limited Liability	Company	5 6 E
	·	ign Danned Disouttly	Company)	5/7/
	Delaware	3		
Junsdiction und ompany is orga	der the law of which foreign limit	led liability	(FEI number, if applicable)	`~\`o
	•		D	0,5
	December 7, 2006 Date of Organization)	5. 	Perpetual ration: Year limited liability company	Will cases to
(Date of Organization)	exis	et or "perpetual")	Will cease to
	(Date first transacted by	usiness in Florida, if	prior to registration.)	
	(See sections 608.501 &	608.502 F.S. to deter	mine penalty liability)	
	6363 Woodway	y, Suite 110, Houston	, Texas 77057-1714	
	· · · · · · · · · · · · · · · · · · ·			
	(Str	rect Address of Princ	pal Office)	
If limited lie	bility company is a manager		ny abaak hara 🗍	
it illinited ha	onity company is a manager	r-managed compa	ny, check here	
The name an	nd usual business addresses	of the managing n	nembers or managers are as follo	ows:
				,
Timothy A. E	Edwards, an individual			
526 River Ru	n I ano			
	II Laute			
J20 KIVEL KU				
	24460			
Millboro, VA	24460			
Millboro, VA Attached is an	n original certificate of existence	e, no more than 90 c	lays old, duly authenticated by the o	official having
Millbore, VA Attached is an	n original certificate of existence s in the jurisdiction under the la	aw of which it is org	anized. (A photocopy is not accept	able. If the certific
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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.

2. The name and the Florida street address of the registered agent and office are:	
National Corporate Research, Ltd.	
(Name)	
515 East Park Avenue	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee, Florida 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 regis 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.	tere

\$ 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 ALTAMONTE SHS 2, 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 NINTH DAY OF DECEMBER, A.D. 2006.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5262655

DATE: 12-09-06

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