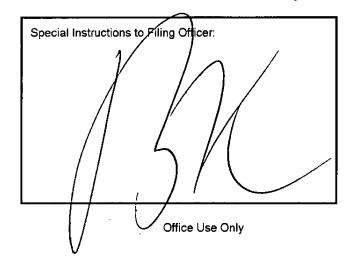
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(F	Requestor's Name)				
	Address)				
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	City/State/Zip/Phone #))			
PICK-UP	MAIT	MAIL			
(I	Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of	Status			





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SECRETARY OF STAILS
TALLANASSEE, FI.ORIDA

HOT THE FOLLOW SUFFICIENCY OF FILING

RECEIVED

DEPARTHENT OF STATE
SHYISION OF CORPORATIONS

THE 21 PM 4: 20



ACCOUNT NO. : 072100000032

REFERENCE :

AUTHORIZATION :

COST LIMIT

ORDER DATE: February 21, 2007

ORDER TIME : 2:25 PM

ORDER NO. : 768835-020

CUSTOMER NO: 4305738

FOREIGN FILINGS

TYLER PLAZA TIC 5, LLC NAME:

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER:

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

	Y COMPANY TO TRANSACT BU		TE OF FLORIDA:	
TYLER	PLAZA TIC 5, LLC			Z.C.
	(Name of Fo	reign Limited Liabil	ity Company)	1000 J
. DE		3		
(Jurisdiction und company is orga	der the law of which foreign lir inized)	nited liability	(FEI number, if applicable)	
02/20/2		5.	Perpetual	
(1	Date of Organization)	,	Duration: Year limited liability company exist or "perpetual")	will cease to
	(See sections 608.501	& 608.502 F.S. to d	if prior to registration.)	
C/O TIC	•	•	te 250, Boise, ID 83706	
	(Street Addi	ress of Principal Off	ice)	
	O Uribe and Martha B. U		050 Daire ID 00700	
). Attached is an o		o more than 90 days od. (A photocopy is n	old, duly authenticated by the official having of acceptable. If the certificate is in a foreign	
1. Nature of b	usiness or purposes to be	conducted or pro	moted in Florida:	
Real Esta	te Investment			
	Ineloc	umbre	Nº .	
,	(In accordance with section an affirmation under the	on 608.408(3), F.S., th penalties of perjury th	zed representative of a member. e execution of this document constitutes at the facts stated herein are true.)	
	Melodie M. E	Bobko, Authoriz	ed Agent	

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 Compa	any is:	
TYLER PLAZA TIC 5, LLC		· .
2. The name and the Florida street address of	of the registered agent and office are:	
Corporation Sen	vice Company	
	(Name)	····
1201 Hays Street	<u> </u>	
Florida Street Addr	ress (P.O. Box <u>NOT</u> ACCEPTABLE)	
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:

(Signature)

Troy Todd
as its agent

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



The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TYLER PLAZA TIC 5, 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 TWENTIETH DAY OF FEBRUARY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TYLER PLAZA TIC 5, LLC" WAS FORMED ON THE TWENTIETH DAY OF FEBRUARY, A.D. 2007.

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

4303682 070188758

AUTHENTICATION: 5443701

DATE: 02-20-07