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| PICK-UP | ☐ WAIT | MAIL |
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PHONE: (850) 216-0457; FAX: (850) 216-0460

DATE: 03-12-07

NAME: IPOFA 3400 NW 74TH AVENUE, LLC

TYPE OF FILING: LLC

COST: \$160.00

RETURN: CERTIFIED COPY & GOOD STANDING

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HOD

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| | Co | TO THE TOTAL PROPERTY OF THE PARTY OF THE PA | |
| | stration Section ion of Corporations | | OT MAN SECRET SOURCE |
| SUBJECT: | IPofA 3400 NW 74th Avenue, LLC | | 366 |
| | (Name of L | imited Liability Company) | - |
| Florida," Cer liability com | | | |
| | Kathi Jo Harris-Temple | | |
| | Q | Name of Person) | |
| | Investment Properties of America, LLC | | |
| | () | Firm/Company) | |
| | 10800 Midlothian Turnpike, Suite 309 | - | |
| | | (Address) | |
| | Richmond, VA 23235 | | |
| | (City/ | State and Zip Code) | |
| For further in | nformation concerning this matter, p | please call: | |
| Kath | i Jo Harris-Temple | at (804) 594-3550 | |
| | (Name of Person) | (Area Code & Daytime Telephor | ne Number) |
| Divis P.O. I | LING ADDRESS: ion of Corporations Box 6327 hassee, FL 32314 | STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | |
| Enclosed is a | check for the following amount: 5.00 Filing Fee Certificate | | ling Fee, Certificate Status & Certified Copy |

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| (Name of Foreign Limited | Lia | bility Company) |
|--|---------------------------------|---|
| Delaware | 3 | 20-8600462 |
| Jurisdiction under the law of which foreign limited liability ompany is organized) | , | (FEI number, if applicable) |
| 3/7/07 | 5. | Perpetual |
| (Date of Organization) | | (Duration: Year limited liability company will cease to exist or "perpetual") |
| | | |
| (Date first transacted business in (See sections 608.501 & 608.502 F. | flori S. to | da, if prior to registration.) determine penalty liability) |
| 10800 Midlothian Turnpike, Suite 309, Richmond, VA 23 | | , ,, |
| 10000 Madiodian 1 displace, Same 305, rectamona, 174, 22 | | |
| | | |
| (Street Addres | ss of | Principal Office) |
| TOT 7 - 1 51 - 1 11/4 | | |
| If limited liability company is a manager-manage | ed c | ompany, cneck nere [✓] |
| | | |
| The name and usual business addresses of the ma | mae | ing members or managers are as follows: |
| | | . • |
| The name and usual business addresses of the ma IPofA Fund Manager, LLC, a Virginia limited liability or | | . • |
| | | . • |
| IPofA Fund Manager, LLC, a Virginia limited liability or | | . • |
| IPofA Fund Manager, LLC, a Virginia limited liability of 10800 Midlothian Turnpike, Suite 309 Richmond, VA 23235 | ompa | му |
| IPofA Fund Manager, LLC, a Virginia limited liability of 10800 Midlothian Turnpike, Suite 309 Richmond, VA 23235 Attached is an original certificate of existence, no more than 9 | ompa O day | ys old, duly authenticated by the official having custody of reco |
| IPofA Fund Manager, LLC, a Virginia limited liability of 10800 Midlothian Tumpike, Suite 309 Richmond, VA 23235 Attached is an original certificate of existence, no more than 9 jurisdiction under the law of which it is organized. (A photocometric of the content of the conte | ompo | ys old, duly authenticated by the official having custody of received acceptable. If the certificate is in a foreign language, a |
| IPofA Fund Manager, LLC, a Virginia limited liability of 10800 Midlothian Tumpike, Suite 309 Richmond, VA 23235 Attached is an original certificate of existence, no more than 9 bjurisdiction under the law of which it is organized. (A photocometric of the content of the cont | ompo | ys old, duly authenticated by the official having custody of received acceptable. If the certificate is in a foreign language, a |
| IPofA Fund Manager, LLC, a Virginia limited liability of 10800 Midlothian Turnpike, Suite 309 Richmond, VA 23235 Attached is an original certificate of existence, no more than 9 sprincipal certificate of the translator must be suitable of the translator must | 0 day | ys old, duly authenticated by the official having custody of receismot acceptable. If the certificate is in a foreign language, a ted.) |
| IPofA Fund Manager, LLC, a Virginia limited liability of 10800 Midlothian Turnpike, Suite 309 Richmond, VA 23235 Attached is an original certificate of existence, no more than 9 ejurisdiction under the law of which it is organized. (A photoconstant of the translator must be su | 0 day | ys old, duly authenticated by the official having custody of receismot acceptable. If the certificate is in a foreign language, a ted.) |
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| IPofA Fund Manager, LLC, a Virginia limited liability of 10800 Midlothian Turnpike, Suite 309 Richmond, VA 23235 Attached is an original certificate of existence, no more than 9 spinisdiction under the law of which it is organized. (A photocombination of the certificate under certific the translator must be suit. Nature of business or purposes to be conducted. | O dar opy i brain or p | ys old, duly authenticated by the official having custody of reos snot acceptable. If the certificate is in a foreign language, a ted.) aromoted in Florida: own real property |
| Richmond, VA 23235 Attached is an original certificate of existence, no more than 9 equisdiction under the law of which it is organized. (A photocombation of the certificate under certific the translator must be sufficient of the tr | Odar opyi bmi | ys old, duly authenticated by the official having custody of recent snot acceptable. If the certificate is in a foreign language, a ted.) bromoted in Florida: own real property |

By:IPofA Fund Manager, LLC, Its Manager; By:Lara D. Coleman, Its Manager

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 | Company is: | |
|---------------|---------------------------------------|--|---|
| 1PofA 3400 NW | 74th Avenue, LLC | | |
| 2. The name | and the Florida street a | ddress of the registered agent and office are: | |
| | Capitol Corporate Servi | ices, Inc. | |
| | · · · · · · · · · · · · · · · · · · · | (Name) | • |
| | 155 Office Plaza Drive, | , Suite A | |
| | Florida St | reet Address (P.O. Box NOT 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.

Capitol Corporate Services, Inc.

By: Ollanie Case, asst. sec. (Signature)

\$ 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

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IPOFA 3400 MW 74TH AVENUE, 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 EIGHTH DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IPOFA 3400 NW 74TH AVENUE, LLC" WAS PORMED ON THE SEVENTH DAY OF MARCH, A.D. 2007.

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

4312972 8300 070294736



Harriet Smith Hinden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5489593

DATE: 03-08-07