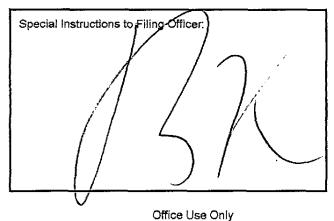
# M0700001447

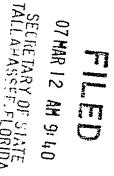
(Request	or's Name)	
(Address	)	
(Address	)	
(City/Stat	e/Zip/Phone	e #)
P [	WAIT	MAIL
(Busines	s Entity Nar	me)
(Docume	nt Number)	
	Certificates	s of Status
	(Address (Address (City/Stat	(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone P WAIT  (Business Entity Nar  (Document Number)





000089237730





## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Drive, Suite A Tallahassee, FL 32301

PHONE: (850) 216-0457; FAX: (850) 216-0460

OTEN TO

DATE: 03-12-07

NAME: IPOFA MIAMI LOGISTICS CENTER LEASECO, LLC

TYPE OF FILING: LLC

COST: \$160.00

RETURN: CERTIFIED COPY & GOOD STANDING

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PART HODGE

#### **COVER LETTER**

	•	COVER LETTER AND SALES
O: Regi	stration Section	
	sion of Corporations	
UBJECT:	IPofA Miami Logistics Center Leaset	Co, LLC  Limited Liability Company)
ODSECT:		Limited Liability Company)
	•	324 The second s
		d Liability Company for Authorization to Transact Business in
	rufficate of Existence, and check a pany to transact business in Flori-	re submitted to register the above referenced foreign limited
	pully to the base of the board	ш.
lease return	n all correspondence concerning th	his matter to the following:
	Kathi Jo Harris-Temple	
		(Name of Person)
		,
	Investment Properties of America, LL	<u>c</u>
		(Firm/Company)
	10800 Midlothian Turnpike, Suite 30	
		(Address)
	Dishmond 3/4 22225	
	Richmond, VA 23235	(0)
	(Cir	ty/State and Zip Code)
or further is	nformation concerning this matter	; please call:
Kath	ni Jo Harris-Temple	at ( 804 )594-3550
	(Name of Person)	(Area Code & Daytime Telephone Number)
	LING ADDRESS:	STREET ADDRESS:
MAI	ion of Corporations	Division of Corporations
Divis	Box 6327	Chron bunding
Divis P.O. i		Clifton Building 2661 Executive Center Circle

### 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 RE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: IPofA Miami Logistics Center LeaseCo, LLC (Name of Foreign Limited Liability Company) Delaware 20-8600462 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 3/7/07 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 10800 Midlothian Turnpike, Suite 309, Richmond, VA 23235 (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: IPofA Fund Manager, LLC, a Virginia limited liability company 10800 Midlothian Tumpike, Suite 309 Richmond, VA 23235 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: own real property

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

By:PofA 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.

The name of the Limited Liability Company is:  IPofA Miami Logistics Center LeaseCo, LLC				
. The name :	and the Florida street ad	dress of the registered agent and office a	re:	
	Capitol Corporate Services, Inc.			
		(Name)	<del></del>	
	155 Office Plaza Drive,	Suite A		
	Florida Stre	cet Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee	FL 32301		
		City/State/Zip	<del></del>	

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: Dllanie Cluse, asst sec

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



DACE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IPOFA MIAMI LOGISTICS CENTER LEASECO, 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 SECOND DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IPOFA MIAMI LOGISTICS CENTER LEASECO, LLC" WAS FORMED ON THE SECOND DAY OF MARCH, A.D. 2007.

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

**4310480** 8300 070275150



Daniet Smith Minden

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 5477008

DATE: 03-02-07