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From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

Phone

: (850)222-1092

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

NNN Retail Properties Fund Sub I LLC

<u></u>	
Certificate of Status	0
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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:

1. NNN Retail I	Properties Fund Sub ILLC				
(Name of	Foreign Limited Liability Company; mus	i includ	e "Limited Liability Company," "L.L.C.	," or "LLC.")	
consent of the m Company," "L.L	able, enter alternate name adopted for the tanagers or managing members adopting the "LLC.")				
2Delaware		3.	75-3254494		
(Jurisdiction u company is or	inder the law of which foreign limited liab ganized)	ility	(FBI number, if applical	ole)	
4. 09/26/2007	·	5.	Perpetual		
	(Date of Organization)		(Duration: Year limited liability comp exist or "perpetual")	1	
6. 09/27/2007				FAE SE	27
	(Date first transacted business (See sections 608.501 & 608.50	in Flori 2 F.S. t	da, if prior to registration.) o determine penalty liability)	CRE	
7. 450 South Or	range Avenua, Suite 900			ASE	l param
Orlando, FL	32801	•		SEC.	
	(Street Ad	dress of	Principal Office)	- N- Z	<u> </u>
8. If limited li	ability company is a manager-man	aged c	ompany, check here	REAT.	
. : 0	7 P. 1			,	- '',
9. The name a	and usual business addresses of the	manag	ing members or managers are as i	оцоws:	*
NNN Rotail I	Properties Fund I LLC				
450 South Or	range Avenue, Sulte 900				,
Orlando, Fil.	32801	,		• ;	1 . t
0. Attached is an	original certificate of existence, no more than	190 da y	sold, duly authenticated by the official har	ving custody of moo	nds in
nejunsticken of the o	der the law of which it is organized. (A plice criticale under oath of the translator must be	ocopy is	not acceptable. If the certificate is in a for	ප්දුත නොදුපනුද, a	
THE PERSON NAMED IN	Commence of the control and temporal transfer	SULETIM	ar)		
1. Nature of b	pusiness or purposes to be conducted	d or p	romoted in Florida: maintain princi	al office	
of limited liabi	lity company				
·	Chita for	L		·	
	Signature of a member or an (in accordance with section 608.408); an affirmation under the penalties of	3), F.S., ·	rized representative of a member. the execution of this document constitutes that the foot stated begins are the 1		
	Christopher P. Tessitore , AUT.	HOR/Z	LED REPRESENDATIVE		
	Typed or prin	ted na	me of signee		

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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: CT Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324 City/State/Zip	07.0CT -4 PHIZ: I.J. SECRETARY OF STATE TAULAHASSEE. FLORIDA
(Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324	TARY
(Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324	PHIZ: I.I
1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324	HIZ: I.I of State florida
Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324	REAL I
Plantation FL 33324	2.
FL	للمذ
FL	
City/State/Zip	* · · · · · · · · · · · · · · · · · · ·
Having been named as registered agent and to accept service of process for the above sta liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of a relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida State CT Corporation System By: Bentara A. Buske Special Assistem Geometry	ent as registered : Il statutes I accept the

Certificate of Status (optional)

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Delaware

PAGE 1

The First State

I. HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELANARE, DO HEREBY CERTIFI "MANN RETAIL PROPERTIES FUND SUB I LIC." IS DULY FORMED UNDER THE LANG OF THE STATE OF DELANARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TRIED DAY OF OCTOBER, A.D. 2007.

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

O7 OCT -4 PH 12: 11

SECRETARY OF STATE
AND SECRETARY OF STATE

4429850 8300 071080125



Variet Smith Hindrey Snows and Owner

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DATE: 10-03-07

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