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(Re	equestor's Name)
(Ac	ldress)
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PICK-UP	☐ WAIT ☐ MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
Į.	Office Use Only



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RECEIVED
OT OCT 26 PN 2: 44
OKING PROSIDER





ACCOUNT NO. : 07210000032

REFERENCE : 291363 4305738

AUTHORIZATION :

COST LIMIT : \$ 160

ORDER DATE: October 26, 2007

ORDER TIME : 1:09 PM

ORDER NO. : 291363-010

CUSTOMER NO: 4305738

FOREIGN FILINGS

NAME: SELINA PLAZA TIC 1, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX____ CERTIFIED COPY

__ PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis -- EXT# 2926

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Selina Plaza TIC 1, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. N/A (FEI number, if applicable)
4. 10/25/07 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 10/29/07 PSG C
960 Broadway Avenue, Suite 250, Boise, Idaho 83706 (Street Address of Principal Office)
960 Broadway Avenue, Suite 250, Boise, Idaho 83706 (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: 3
Selina Plaza, L.L.C., a Florida limited liability company
782 Shipwatch Drive, E, Jacksonville, Florida 92225
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: <u>real estate investment</u>
Rebera S. Heatl
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.)

Rebecca S. Heath, Authorized Representative
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.

2 The name	and the Florida street addre	ss of the registered agent and office are:	
2. The name	and the Piorida street addres	ss of the registered agent and office are:	
	Corporation Service	ce Company	
	<u> </u>	(Name)	
	1201 Hays Street		
	Florida Street A	Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FI. 32301	
		City/State/Zip	
liability comp agent and agr	any at the place designated in ee to act in this capacity. I fi	nd to accept service of process for the above in this certificate, I hereby accept the appoin arther agree to comply with the provisions of mance of my duties, and I am familiar with	ntment as registere of all statutes

Corporation Service Company

BY:

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

Harry B. Davis

Asst. Vice President

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SELINA PLAZA TIC 1, 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 TWENTY-FIFTH DAY OF OCTOBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SELINA PLAZA TIC 1, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF OCTOBER, A.D. 2007.

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

071155977

AUTHENTICATION: 6106490

DATE: 10-25-07