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FLORIDA/FOREIGN LIMITED LIABILITY

Cole MT Plantation FL, LLC

Certificate of Status	0
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Page Count	045
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JUN 2 6 2008

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June 25, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: COLE MT PLANTATION FL, LLC

REF: W08000030497

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, with a days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, part (850) 245-6020.

Tammi Cline Regulatory Specialist II FAX Aud. #: H08000158395 Letter Number: 308A00038250

PE-SUBMIT

Please relate original films date of submission 4124

RECEIVED BJUN 25 PH 1:33 SECRETARY FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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

IN COMPLIANCE WITH SECTION 60:503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L	IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA		
1.	COLE MT PLANTATION FL, LLC		
••	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		
CO	f name unavailable, enter alternate name adopted for the purpose of transacting business in Plotida and attach a copy of the wronsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C.," "LLC.")	itton	
2	DELAWARE 3.		
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4.	JUNE 19, 2008 5. PERPETUAL		
•	(Date of Organization) (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.	2555 EAST CAMELBACK ROAD, SUITE 400		
	PHOENIX, AZ 85016		
	(Street Address of Principal Office)		
8.	If limited liability company is a manager-managed company, check here		
9,			
	COLE REIT ADVISORS II, LLC; 2555 EAST CAMELBACK ROAD, SUITE 400; PHOENIX, AZ 85016		
	AART SSE	24	
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TIT.). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody efficience is jurisdiction, under the law of which it is organized. (A photocopy is not acceptable, If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)	ile Utel	
11	1. Nature of business or purposes to be conducted or promoted in Florida: Ownership and leasing of real		
	property and all other lawful acts		
	TP		
	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 as affirmation under the penaltics of perjury that the facts stated herein are true.) Todd J. Weiss, Vice President of Cole REIT Advisors II,		
	LIG. Its Manager (T)(A)		
	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.

Having been named as registered agent and to accept service of process for the above stated limited blability 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. CT Corporation System CONNIE SETTING By:	If name unavailable	, the alternate name to b	e used in the state of	f Florida is:	
(Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324 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 abbligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. CT Corporation System CNAME STATE By:	2. The name and th	e Florida street address	of the registered ago	ent and office are:	
Plantation Planta		ст	Corporation System		
Plantation Plantation FL 33324 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. CT Corporation System By:			(Name)		-
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	71	as registered agent and t the place designated in t	to accept service of phis certificate, I here	orncess for the above s aby accept the appoints with the provisions of	stated limited: == ment as revistered
	relating to the prope obligations of my po	or and complete performa osition as registered agent Corporation System	nnce of my duties, and as provided for in (INNSE 1884 W	d I am familiar with a Chapter 608, Florida S	Statutes, 🚟 -
\$ 100.00 Filing Fee for Application	relating to the prope obligations of my po	er and complete performation as registered agent Corporation System (Signature)	nnce of my duties, and as provided for in (ONNIE BRYKE ENAL FORSTANY Filing Fee for A	Chapter 608, Florida S	Statutes, 💮 -
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)	relating to the prope obligations of my po	er and complete performance of the performance of t	nice of my duties, and as provided for in the Charles BRYANGE BRYANGE BRANGE BRIDGE Filing Fec for Appendicular of I	Chapter 608, Florida S pplication Registered Agent	Statutes.

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COLE MT PLANTATION FL, 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 JUNE, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COLE MT PLANTATION FL, LLC" WAS FORMED ON THE NINETEENTH DAY OF JUNE, A.D. 2008.

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

2000 JUN 2:4 AM 8: 47
SECRETARY OF STATE
TALLAHASSEE, FI ORIGA

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080711667

You may verify this certificate onlin

Daniel Smile Hindre

Harriat Smith Windsor, Secretary of State

AUTHENTICATION: 6676800

DATE: 06-20-08

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