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**EXAMINER** 





ACCOUNT NO. : 072100000032

REFERENCE : 787<u>07</u>2

AUTHORIZATION : (

COST LIMIT

ORDER DATE: November 10, 2008

ORDER TIME : 2:45 PM

ORDER NO. : 787072-010

CUSTOMER NO: 5173242

#### FOREIGN FILINGS

NAME: TALLAHASSEE APARTMENTS HH, 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: Susie Knight -- EXT# 2956

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:

EXCEPTION OF THE PROPERTY OF THE STATE OF TRANSPORT
1. Tallahassee Apartments HH, 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 written 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)  (FEI number, if applicable)
4. November 10, 2008  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. 827-835 West Georgia Street
Tallahassee, Florida 32304
(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:
Capmark Finance, Inc
116 Welsh Road
Horsham, PA 19044
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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: to acquire, rename,
market, improve, lease, own, operate, and liquidate a student housing propject
Samuel Dines
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.)
Samuel J. Jones
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:	
Tallahassee Apartments HH, LLC	<del></del>
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Corporation Service Company	
(Name)	
1201 Hays Street	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee <sub>FL</sub> 32304	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated limi liability company at the place designated in this certificate, I hereby accept the appointment as reagent and agree to act in this capacity. I further agree to comply with the provisions of all statute relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.  Corporation Service Company  BY: William M. Edwardow	gistered s

William M. Edrington, Authorized Representative

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 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 "TALLAHASSEE APARTMENTS HH, 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 TENTH DAY OF NOVEMBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TALLAHASSEE APARTMENTS HH, LLC" WAS FORMED ON THE TENTH DAY OF NOVEMBER, A.D. 2008.

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

081104358

Harriet Smith Windsor, Secretary of State AUTHENTICATION: 6958284

DATE: 11-10-08

8300

You may verify this certificate online at corp. delaware.gov/authver.shtml