Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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FLORIDA/FOREIGN LIMITED LIABILITY CO. LSREF Orange (Orlando), LLC

Certificate of Status	0 .
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G. MCLEOD

NOV 2 0 2009

EXAMINER

COVER LETTER

TO;	Registration Section Division of Corporations			
SUBJEC	LSREF Orange (Orlando), LLC			
*****	Name of Limited Liability Company			
The encl Existence	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please re	turn all correspondence concerning this matter to the following:			
	Dianna H. Heise			
•	Name of Person			
	Hudson Advisors LLC			
	Firm/Company			
	2711 N. Haskell Avenue, Suite 1800			
	Address			
	Dallas, Texas 75204			
	City/State and Zip Code			
	diheise@hudson-advisors.com			
	E-mail address: (to be used for future annual report notification)			
For furth	er information concerning this matter, please call:			
	Dianna H. Heise at 214 754-8651			
	Name of Person Area Code & Daytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, PL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclose	ed is a check for the following amount:			
C	\$125.00 Filing Fee \$\int \text{\$130.00 Filing Fee & }\text{\$155.00 Filing Fee & }\text{\$160.00 Filing Fee, Certificate }\text{Certificate of Status} \text{\$Certified Copy}			

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. LSREF Orange (Orla (Name of Foreign Limited Lie		ust include "Limited Liability Company," "L.L.C.," or "LLC.")	-
		he purpose of transacting business in Florida and attach a copy of the sternate name. The alternate name must include "Limited Liabi	
Delaware (Jurisdiction under the law of whice company is organized)	h foreign limited li	3. N/A (FEI number, if applicable)	-
4. 11/17/2009		5. Perpetual	
(Date of Organizati	on)	(Duration: Year limited liability company will cease to exist or "perpetual")	
6 Upon Filing	•		NON 60
		ss in Florida, if prior to registration.) 502 F.S. to determine penalty liability)	N
7. 2711 N. Haskell Ave	nue, Suite 170	00	19
Dallas, Texas 7520	ъ		09 NOV 19 AM 10: 20
		Address of Principal Office)	- a - }
9 If limited liability company	ic a manager-ma	anaged company, check here X	20
-	·		4
9. The name and usual busines	s addresses of th	ne managing members or managers are as follows:	
Michael D. Thomson	Manager	2711 N. Haskell Ave., #1700, Dallas, TX 75204	
Marc L. Lipshy	Manager	2711 N. Haskell Ave., #1700, Dallas, TX 75204	_
Stewart L. Motley	Manager	2711 N. Haskell Ave., #1700, Dallas, TX 75204	ļ
10. Attached is an original certificate of the jurisdiction under the law of which translation of the certificate under oath of the Nature of business or purpose Real Estate	it is organized (A pi of the translator mus	·	conds in
Real Calale	41		- *
	Mare &	. 1:p8h.	
(in accordu	oce with section 608.4	r an authorized representative of a member. 408(3), F.S., the execution of this document constitutes as of perjury that the facts stated herein are true.	
	larc L. Lipshy,	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.

1. The name of the Limited Liability Company is:
LSREF Orange (Orlando), LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
C T Corporation System
(Name)
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation P1 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 registere 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 Corpordion System Chris McNedit Assistant Secretary
\$ 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, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LSREF ORANGE (ORLANDO), 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 NINETEENTS DAY OF NOVEMBER, A.D. 2009.

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

091032479

DATE: 11-19-09

CATION: 7652106