Page 1 of 2

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To:

Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Pax Number : (850)878-5368

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Foreign Limited Liability Company LOAN OAK - SHADER II, L.L.C.

Certificate of Status	0
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

J. BRYAN

JAN 25 2011

EXAMINER

COVER LETTER

	istration Section ision of Corporations				
SUBJECT:	LONE OAK - SHADER II, L.L.C.				
]	Name of Limited Liability Cor	mpany		
Existence, an	"Application by Foreign Limited L d check are submitted to register the all correspondence concerning this	e above referenced foreign lim			
	MARIE A. CHAPETTA				
	•	Name of Person			
	REYES HOLDINGS, L.L.C.	·			
		Firm/Company			
	6250 N. RIVER ROAD, SUITE 9000				
	Address				
	ROSEMONT, IL 60018			FILED M 8: 30 III JAN 24 M 8: 30 SECRETARY OF STATE SECRETARY OF FLORID.	
		City/State and Zip Code		影。四	
	mchapetta@reyesholdings.com			Fr	
	E-mail address	: (to be used for future annual	report notification)	- SE 3	
For further in	formation concerning this matter, pl	lease call;		5	
Mario	с Л. Chapetta	nt (⁸⁴⁷	227-6686		
	Name of Person	Area Code & Daytime	Telephone Number		
Divis Regis P.O.	LING ADDRESS: nion of Corporations stration Section Box 6327 hassec, FL 32314	STREET ADDRESS; Division of Corporations Registration Section Clifton Building 2661 Executive Centor Ci Tallahassee, FL 32301	ircle		
	a check for the following and .00 Filing Pee \$\int_S130.00 Filing\$\text{Certificate of S}\$	Fee & S155.00 Filing Fee	e & \$160.00 Filing Fee, Co of Status & Certified (

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

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	Gi
1. LONE OAK - SHADER II, L.L.C.	
(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.")	i c n
2. DELAWARE 3.	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. 1-24-2011 5. Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
5	
(Date first transacted business in Florida; if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	~
7. 6250 N. River Road, Suite 9000, Rosemont, IL 60018	-
ASSOCIATION OF THE PROPERTY OF	
(Street Address of Principal Office)	Ĺ
3. If limited liability company is a manager-managed company, check here	•
7. The name and usual business addresses of the managing members or managers are as follows:	
Lone Oak Realty LLC	
6250 N. River Road, Suite 9000, Rosemont, IL 60018	
O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the properties of the certificate is in a foreign language, a tenslation of the certificate under eath of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: real estate.	a
Signature of a member or an anthorized 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 I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Nicholas L. Giampietro, Secretary	

Typed or printed name of signee

1 Dinternant William Deline

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 Liabili	ity Company is:	
LONE OAK - SHADER II, L.L.C.		
If unavailable, the alternate to be u	sed in the state of Florida is:	•
	address of the registered agent and office ar	SEC T
C T Corporation System	(Name)	AREA AND AND AND AND AND AND AND AND AND AN
	Road Street Address (P.O. Box NOT ACCEPTABLE)	RY OF STATE SSEE, FLORID
Plantation	. FL 33324	D
	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 maying the Control of the provided Statutes.

CT Comparison System

By:

Assistant Secretary

(Signature)

TO THE PROPERTY OF CHARGE AND INC.

\$ 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 "LONE CAK - SHADER II, L.I.C." IS DULY FORMED UNDER THE LANS 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-FOURTH DAY OF JANUARY, A.D. 2011.

4930669

You may varify this destificate online at corp.delaware.gov/authver.shtml

AUTHENTICATION: 8512612

DATE: 01-24-11