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Florida Department of State Division of Corporations

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#### Foreign Limited Liability Company LSREF2 Baron, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

B. BOSTICK

#### COVER LETTER

	istration Section Islon of Corporations		
SUBJECT:	LSREF2 Baron, LLC		
	)	Name of Limited Liability Company	
The unclosed Existence, an	"Application by Poreign Limited L. 4 check are submitted to register the	iability Company for Authorization to Transact Business in Florida," Contificate of a above referenced foreign limited liability company to transact business in Florida.	
Please return	all correspondence concerning this	matter to the following:	
	Dianas H. Heise	•	
		Name of Person	
	c/o Hudson Advisors LLC		
		Firm/Company	
	2711 N. Haskell Avenus, Suite	1800	
		Address	
	Dullas, Texas 75204		
		City/State and 2.1p Code	
	dihoise@hudson-advisors.com		
•	E-mail address:	: (to be used for future annual report notification)	
For further in	formation concerning this matter, pl	cuse call:	
Diana	ut H. Helse	at (214 ) 754-8651	
	Name of Person	Area Code & Daytime Telephone Number	1511 ga.
Divis	LING ADDRESS: sian of Carporations stration Section	STREET ADDRESS: Division of Corporations Registration Section	Angles
P.O.	Box 6327 hassec, FL 32314	Clifton Building	(Martinia)
1 11 121	missio, 1.6 37314	Tallahassee, FL 32301	*Anad
	a check for the following amo .00 Filing Pec \$\int_{\text{S130.00}}\text{Filing}. Certificate of \$	Fee & 17\$155.00 Filing Fee & 15160.00 Filing Fee, Certificate	

## 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	LSREF2 Baron, LLC		
	(Nume 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 Florida and attach a copy of the onsent of the numagers or managing members adopting the alternate name. The alternate name must include "Limited Liabilion pany," "L.L.C," "LLC,")		
2.	Delaware 3, 45-2696537		
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4.			
	(Dute of Organization) (Duration: Your limited liability company will cease to exist or "perpetual")		
6.	Upon filing		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	,	
7.	2711 N. Haskell Avenue, Suite 1700		
	Dallas, Texas 75204		
	(Street Address of Principal Office)		
8.	If limited liability company is a manager-managed company, check here	ÁUG	<b>to</b> s
9.	The name and usual business addresses of the managing members or managers are as follows:	<u>-</u>	17 17
	LSREF2 Baron Sub Holdings, LLC "Bole Member"	72	3
	27) I N. Haskell Avenue, Suite 1700	Ġ;	i
	Dalles, Texus 75204	25	
th	). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receiptification under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation, of the certificate under cath of the translator must be submitted.)	ords in	
<b>!</b> 1	. Nature of business or purposes to be conducted or promoted in Florida:		
	Real estate investments	•	
	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 sisted 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.)  Layne B. LeBaron, Secretary of LSREF2 Baron Sub Holdings, LLC "Member"		

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.

I. The nam	e of the Limited Liability on, LLC	Company is:		_
If unavailab	le, the alternate to be use	d in the state of Florida is:		•
2. The name	e and the Florida street a	idress of the registered agent and off	five are:	
	C T Corporation System			1
		(Name)	TO ASS.	AUG 15
	1200 South Pine Island is	oad		
	Florida St	est Address (P.O. Box NOT Acceptable)	7. S.	PA S
·	Plantation	FL 33324	ORIC	8: 25
	·	City/State/Zip	A A	O1
liability comp agent and ag relating to th	pany at the place designa tree to act in this capacity e proper and complete po	t and to accept service of process for ed in this certificate, I hereby accept t I further agree to comply with the pr formance of my duties, and I um fam. I agent us provided for in Chapter 60 System  [Ki (Signature)	the appointment as register rovisions of all statutes iliar with and accept the	red
		· ·	<b>y</b>	
		00.00 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 "LSREF2 BARON, 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 TWELFTH DAY OF AUGUST, A.D. 2011.

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

5004725 8300

110917298

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

AUTHENTY CATION: 8967700

DATE: 08-12-11