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EAST TBR JACKSON SQUARE OWNER LLC

TYPE OF FILING: ARTICLES OF CORRECTION

COST: \$55

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ACCOUNT: **FCA000000015**

AUTHORIZATION: ABBIE/PAUL HODGE

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST East	E: The name of the limited liability company is: TBR Jackson Square Owner					
SECO (CH	ND: The articles of organization or the application to transact business ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT					
Ø	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:					
	The address listed under Section 7 contains an incorrect suite number.					
	The correct address is as follows: 1575 Northside Drive, NW, Building 100,					
	Suite 200, Atlanta, GA 30318					
	<u>OR</u>					
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:					
Dated:	September 21 _ 2011					
	Ein Whin					
	Signature of a member or authorized representative of a member					
	Fro R Wilsensky - Altorney in Fact Typed or printed hame of signee					
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)					

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: East TBR Jackson Square Owner, 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," "L.LC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) August 3, 2011 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 1575 Northside Drive, NW, Building 100, Suite 300 Atlanta, GA 30318 (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: TriBridge Co-Invest 4, LLC, Manager 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 oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: To hold and manage real estate 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.) Eric R. Wilensky, Attorney-in-fact 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 C	Company is:		
	East TBR J	ackson Square O	wner, LLC	
If un av ailab	le, the alternate to be used	in the state of Florida	is:	
2. The name	e and the Florida street add	ross of the registered a	gent and office are:	
	NRAI Services, Inc.			_
		(Name)		
	515 East Park Avenue			_
	riorida Stree	t Address (P.O. Box <u>NOT</u>	ACCEPTABLE)	
	Tallahassee	FI.	32301	-
		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. NRAI Services, Inc.

Gwendolyn Andrews, Spl. Asst. 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

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "EAST TBR JACKSON SQUARE OWNER, 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 THIRTIETH DAY OF AUGUST, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EAST TBR JACKSON SQUARE OWNER, LLC" WAS FORMED ON THE THIRD DAY OF AUGUST, A.D. 2011.

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

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AUTHENTY CATION: 9000640

DATE: 08-30-11

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