Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000259082 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Phone

Account Number : FCA000000023 : (850)222-1.092

Fax Number

: (850)878-536B

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email	Address:			

## Foreign Limited Liability Company ACC OP (Studio Green) LLC

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

J. SAULSBERRY **EXAMINER** 

DCT 31 204

# 2011 OCT 28 AM 8

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

IN COMPLIANCE WITH SECTION 608563, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF PLANIDA:

I. ACC O	DP (Studio Groen) L.(.C ime of Fureign Limited Liability Company; must it	nclude "Limited L'ability Company," "L.L.C.," or "ELC.	<del>")</del>
consent of	invailable, enter alternate name adopted for the putition managers or managing members adopting the multiple.""	mose of transacting business in Florida and attach a copy afternate name. The alternate name must include "Limite	of the written d Liebility
2. Delawa	NC	3	
	tion under the law of which foreign limited liability is organized)	iy (Fill number, if applicable)	
4. 10/27/2		5 Perpetual	
	(Date of Organization)	(Dutation: 'Year limited liability company will or exist or "pr: petual")	SEC SEC
6			- AR - S
	(Date first transacted business in (See sections 608.501 & 608.502 i	F.S. to determine p inally liability)	
7. 12700	Hill County Bautevard, Suite T-200		AR SS
Austin,	Texas 78738		
	(Street Addr	ess of Principal Office)	15. 1.S.1
8. If limi	ted liability company is a manager-manag	ged company, chick hore.	
9. The m	nine and usual business addresses of the m	nauaging members or managers are as follows:	
Americ	can Campus Communities Operating Partnership L	٠. ١	
12700	Hill Country Boulevard, Suite T-200		*****
Austin,	Texas 78738		
the jurisdicti translation of	ion outler the law of which it is organized. (A photos of the certificate under odd) of the humbater must be s	•	age, a
11. Natur	re of business or purposes to be conducted	for promoted in Clorida: Engage in my lawfa) net c	11
nctivity			<del></del> -
	SEE ATTACHED A	ADDENDUM	
		authorized representative of a member.	
	penaltics of periory that the facts stated herein ac-	execution of this document constitutes an affirmation under the current arm aware that why false information submitted in tites a third degree fallony as provided for in a 817,155, P	tı (.S.)
	Typed or prin	ted name of signos	

### **ADDENDUM**

### ACC OP (STUDIO GREEN) LLC

By: American Campus Communities Operating Partnership LP, its Managing Member

By: American Campus Communities Holdings LLC. its General Partner

By: American Campus Communities, Inc., its Sofe Member

}y: \_\_\_\_

Name: Jon flow (9)

SECRETARY OF STÀTE ALLAHASSEE, FLORIO

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 (1) 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMETS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

ii unavailable, t	the alternate to be used in	n the state of Florida is:	
2. The name an	ad the Florida street addr	ress of the registered agent and office are	;
	C T Corporation System		2011 OCT SECRET TALLAHA
		(Name)	AAA OCI
	1200 South Pine Island Rond		28 TAR ASS
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	Y OF
	Plantation	FL 3332	1.01 1.01 1.01 1.01 1.01
	deprise a word of the provide paragraph of the first of the surface contents.	City/State/Zip	31 RIDA

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.

> Kimberly Baggett Assistant Secretary

> > \$ 100.00 Filing Fee for Application Designation of Registered Agent \$ 25.00 Certified Copy (optional) \$ 30.00

Certificate of Status (optional) 5.00

# The First State

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

DELAWARE, DO HEREBY CERTIFY "ACC OP (STUDIO GREEN) 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 TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2011.

2011 OCT 28 AM 8: 31
SECRETARY OF STATE

5057830 8300

111142413

Jelfrey W. Bullock, Secretary of State

AUTHEN TYCATION: 9121813

DATE: 10-28-11

You may verify this certificate onli.